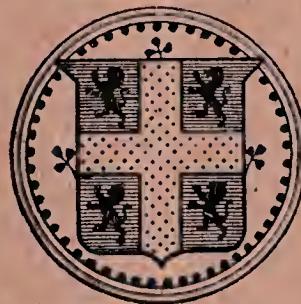


COUNTY COUNCIL OF DURHAM.

EDUCATION DEPARTMENT.



ANNUAL REPORT

OF THE

PRINCIPAL SCHOOL  
MEDICAL OFFICER

GEORGE WILSON

M.B., B.S., B.Hy., D.P.H.

FOR THE YEAR 1960.

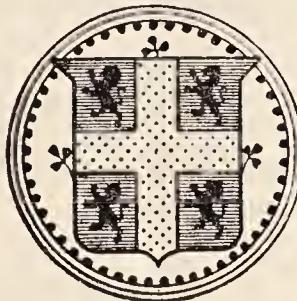
PUBLIC HEALTH LIBRARY,

LONDON COUNTY COUNCIL



## COUNTY COUNCIL OF DURHAM.

EDUCATION DEPARTMENT.



=====

# ANNUAL REPORT OF THE PRINCIPAL SCHOOL MEDICAL OFFICER

GEORGE WILSON  
M.B., B.S., B.Hy., D.P.H.

FOR THE YEAR 1960.

(R.N. 80-62)



78 May 1960

## INDEX

	<b>PAGE</b>
Convalescent Treatment ... ... ... ... ... ... ... ...	20
Co-operation with Medical Practitioners, Hospital and other Health Services ... ... ... ... ... ... ... ...	16
Courses and Conferences ... ... ... ... ... ... ... ...	10
Defects found at Medical Inspections ... ... ... ... ...	12
Dental Service ... ... ... ... ... ... ... ...	26
Eye Service ... ... ... ... ... ... ... ...	14
Handicapped Pupils ... ... ... ... ... ... ... ...	16
Infectious Diseases ... ... ... ... ... ... ... ...	16
Medical Inspection ... ... ... ... ... ... ... ...	11
Medical Treatment ... ... ... ... ... ... ... ...	14
Miscellaneous Medical Examinations ... ... ... ... ...	20
Provision of School Meals ... ... ... ... ... ... ...	27
School Clinics ... ... ... ... ... ... ... ...	14
School Hygiene and Sanitation ... ... ... ... ... ...	11
School Psychological Service and Child Guidance Service ... ...	21
Special Schools ... ... ... ... ... ... ... ...	21
Speech Therapy ... ... ... ... ... ... ... ...	25
Staff ... ... ... ... ... ... ... ...	6
Stockton-on-Tees Committee for Education—Annual report on School Health Service ... ... ... ... ... ... ...	29



## PREFACE.

Ladies and Gentlemen,

I beg to present the Annual Report on the School Health Service and the health of the school children in the administrative county for 1960. During the year, Dr. George Howard Shanley retired on reaching the age limit. He joined the County Council staff as a School Medical Officer in 1936 and prior to his retirement, he was Deputy Principal School Medical Officer for over six years. During that period he had seen considerable development in the Service to which he made his own particular contribution and he carried with him in his retirement, the good wishes of all engaged in the Service. This report has been prepared by his successor, Dr. J. T. W. Reid, who took over the duties of Deputy Principal School Medical Officer in September, 1960. A report on the work of the School Health Service in the excepted district of Stockton-on-Tees, prepared by Dr. H. J. Peters, Area Medical Officer, is also appended.

There has been some improvement in the availability of dental treatment for school children in the county, although this is largely staffed by part-time dental officers and a second dental surgery was opened at the Durham clinic. The second mobile dental van was taken into the Service during the year and is fully occupied in the more scattered parts of the County in the Tees Valley. I am glad to report that some of the delay in examining children with visual defects has been overcome by the appointment of part-time consultant ophthalmologists.

I again wish to thank the staff of the Education Department. I am also greatly appreciative of the co-operation of the teaching staffs in the schools and colleges of the county whose continued help means so much to the smooth running of a service of this kind. I should like also to express my thanks to the Chairman and Members of the Education Committee for their continued consideration and support.

I am, Ladies and Gentlemen,

Your obedient Servant,

GEORGE WILSON.

# COUNTY COUNCIL OF DURHAM

## EDUCATION (MEDICAL) DEPARTMENT.

---

### Fifty-Third Annual Report of the Principal School Medical Officer.

---

#### *General Statistics.*

The numbers given below relate to the Administrative County Area excluding the Excepted Division of Stockton-on-Tees. Figures relating to this Division appear in Dr. Peter's report on page 30.

<i>Type of School Department.</i>	<i>No.</i>	<i>No. on rolls.</i>
Nursery ... ... ...	18	780
Primary ... ... ...	525	97,730
Secondary Modern ...	108	37,890
Secondary Grammar ...	20	11,779
Grammar/Technical		
Special Schools ...	8	622
	—	—
	679	148,801
	—	—

*Staff of the School Health Service.*

**PRINCIPAL SCHOOL MEDICAL OFFICER :—**

George Wilson, M.B., B.S., B.Hy., D.P.H.

**DEPUTY PRINCIPAL SCHOOL MEDICAL OFFICER :—**

George H. Shanley, L.M.S.S.A. (Retired 23.9.60).

Joseph T. W. Reid, M.B., Ch.B., D.P.H. (Commenced 26.9.60).

**ASSISTANT TO DEPUTY PRINCIPAL SCHOOL MEDICAL OFFICER :—**

Walter E. Rigby, M.B., Ch.B.

**SCHOOL MEDICAL OFFICERS :—**

George L. Anderson, M.B., B.S.

Kamila W. Balut (Mrs.), M.B., Ch.B.

Francis G. Carr (Mrs.), M.B., Ch.B.

Phyllis B. Clinton (Mrs.) M.B., Ch.B., D.C.H. (Resigned 31.8.60).

Alexandra J. Edwards (Mrs.), M.B., Ch.B.

Muriel M. Eustace (Mrs.), L.R.C.P., L.R.C.S. (Commenced 18.1.60).

Maurice B. Griffith, M.B., Ch.B.

Susan MacMahon, M.B., Ch.B., B.A.O., D.P.H.

Alastair R. McNaughton, M.B., Ch.B.

Dorothy D. Nichol, M.B., B.S., B.Hy., D.P.H.

Amy M. Parkinson, M.B., M.R.C.S., L.R.C.P.

Duncan P. Pick, M.B., Ch.B.

Joyce Shaw (Mrs.), M.B., B.S.

Sheila Sherrington (Mrs.), M.B., B.S.

Kathleen M. Stevens, M.B., B.S.

Rosa Strunin (Mrs.), M.D.

Shirley M. C. Thompson (Mrs.), M.B., B.S.

Walter Welsh, L.R.C.P., L.R.C.S., L.R.F.P.S.

Alexander S. M. Wilson, L.R.C.P., L.R.C.S., L.R.F.P.S., D.P.H.

Mary A. Wynne (Mrs.), M.B., B.S.

Dorothy Field (Mrs.), M.B., Ch.B., M.R.C.S., L.R.C.P. (Part-time).

John G. Paley, M.R.C.S., L.R.C.P., D.P.H. (Part-time).

**SCHOOL MEDICAL OFFICERS (to act as Dental Anaesthetist) :—**

Francis T. Hardy, M.B., Ch.B.

Dorothy Field (Mrs.), M.B., Ch.B., M.R.C.S., L.R.C.P. (Part-time).

**SCHOOL OCULISTS (Part-time) :—**

Ramrao N. Ajinkya, M.B., B.S., F.R.C.S. (Commenced 4.4.60).

John S. Arkle, M.B., B.S., L.R.C.P., F.R.C.S. (Commenced 8.4.60).

Jacob Frankenthal, L.R.C.P., L.R.C.S. (Commenced 7.4.60).

James Hempenstall, L.R.C.P., L.R.C.S. (Commenced 17.6.60).

John McClemont, M.B., Ch.B. (Commenced 5.4.60).

Maurice L. Nairac, M.R.C.S., L.R.C.P. (Commenced 5.4.60).

Victor G. O'Leary, M.B., B.Ch. (Commenced 8.4.60).

Claud J. Sharp, M.B., Ch.B. (Commenced 5.4.60).

John Trotter, M.B., Ch.B. (Commenced 16.6.60).

## CONSULTANT PAEDIATRICIANS FOR SPECIAL SCHOOLS.

James M. Stansfeld, M.A., M.D. (Cantab), M.R.C.S., L.R.C.P.	Windlestone Hall Residential Special School for Delicate Pupils.
John J. Tillie, M.B., Ch.B., M.R.C.P. (Ed.) and Lond.)	Redworth Hall Residential Special School for Delicate Senior Boys.
John L. Greaves, M.D., M.R.C.P. (Lond.)	

## PRINCIPAL SCHOOL DENTAL OFFICER :—

Margaret M. Lishman (Mrs.), L.D.S., R.C.S

## SCHOOL DENTAL OFFICERS :—

### Full-time.

Kathleen M. Atkinson (Mrs.), L.D.S.  
Elizabeth M. Berrystone, L.D.S. (Resigned 31.8.60).  
John N. Cairncross, L.D.S.  
Jill Duffy, L.D.S. (Commenced 22.8.60).  
Catherine P. Hurst (Mrs.), L.D.S. (full-time from 1.5.60).  
Charles A. F. Lloyd, L.D.S., R.C.S. Edin.  
Nancy Lockett (Mrs.), L.D.S.  
Ethelwyn I. S. Makepeace (Mrs.), L.D.S. (full-time from 30.8.60).  
Christopher S. Matthews, B.D.S.  
Avril Potts, L.D.S., R.C.S.  
Rita A. Spencer (Mrs.), B.D.S.  
Malcolm W. Simpson, B.D.S. (H.M. Forces).  
Philip E. Sausby, B.D.S. (commenced 26.9.60).  
Joan H. Wilkinson (Mrs.), B.D.S. (Commenced 21.11.60).

### Part-time.

Lionel F. Breakey, B.D.S. (Commenced 26.4.60. Resigned 27.9.60).  
Dorothy Caulker (Mrs.), B.D.S. (Commenced 19.12.60).  
Robert Clucas, B.D.S. (Commenced 6.1.60).  
James D. Coote, B.D.S. (Commenced 20.7.60).  
Colin Davidson, B.D.S.  
Andre R. Danjoux, B.D.S. (Commenced 9.2.60).  
Madhusudan Gandhi, B.D.S. (Resigned 1.11.60).  
Raymond M. Haddon, B.D.S.  
Shirley J. Haggie (Mrs.), B.D.S.  
Robert B. Hartford, B.D.S.  
Terence D. Harrison, B.D.S.  
Samuel D. Heward Mills, B.D.S.  
Catherine P. Hurst (Mrs.), L.D.S. (Resigned 29.4.60).  
Ethelwyn I. S. Makepeace (Mrs.), L.D.S. (Resigned 29.8.60).  
Anne W. Montgomery (Mrs.), B.D.S. (Resigned 16.12.60).  
Barry Moss, B.D.S. (Commenced 27.6.60).  
Ruth M. Nixon (Mrs.), L.D.S., R.C.S. (Edin.). (Commenced 21.9.60).  
Marion J. Patterson (Mrs.), L.D.S.  
John V. Playford, B.D.S. (Resigned 4.3.60).  
David G. Phillips, B.D.S. (Commenced 4.7.60).  
Margaret Sainsbury (Mrs.), L.D.S.  
Hoosen A. Seedat, B.D.S. (Commenced 26.7.60).  
Jane M. Sim (Mrs.), L.D.S.  
Ann E. Walton (Mrs.), L.D.S.  
Patrick White, B.D.S. (Commenced 5.1.60).

## SENIOR EDUCATIONAL PSYCHOLOGIST :—

Jack Sellars, B.A. (Left 30.11.60).

## ASSISTANT EDUCATIONAL PSYCHOLOGISTS :—

John S. Aston, B.A., B.Sc.

Rita M. Cameron, B.A. (Commenced 1.9.60).

John E. C. De Quincey, B.A., Dip. Ed. (Resigned 31.3.60).

John Gordon, M.A., B.Ed., Dip. Ed.

Francis G. Mahoney, B.A.

William McIntosh, M.A., Ed.B. (Resigned 30.6.60).

Eric Shearer, M.A., Ed.B., Dip.Ed.

PSYCHIATRIST (*Part-time*) :—

Margaret R. Whalley (Mrs.), M.B., Ch.B.

## PSYCHIATRIC SOCIAL WORKER :—

Alice F. Sluckin (Mrs.), (Part-time). (Resigned 31.10.60).

## SENIOR SPEECH THERAPIST :—

Catherine Thom, L.C.S.T. (Commenced 1.12.60.).

## SPEECH THERAPISTS :—

Daisy Cadwallender (Mrs.), L.C.S.T. (Part-time).

Naomi D. Briscoe (Mrs.), L.C.S.T. (Resigned 30.4.60).

Diana M. Eady, L.C.S.T. (Commenced 12.9.60).

Sheila Ellis, L.C.S.T. (Commenced 1.9.60).

Margaret Milligan (Mrs.), L.C.S.T. (Resigned 31.8.60).

Catherine Thom, L.C.S.T. (Resigned 30.11.60).

## AUDIOMETRICIANS :—

James Valentine.

George W. Crammond.

## NURSING STAFF :—

Miss A. Fraser, Superintendent Health Visitor, assisted by a staff of 103 Health Visitors who devote part of their time to school work.

## SCHOOL NURSES :—

Veronica Smith (Mrs.).

Nellie Anderson.

Elizabeth J. Atkinson.

Sarah J. Boyes.

Isabel Broadley (Mrs.).

Ivy Cairns (Mrs.).

Veronica Callan.

Margaret M. Carr (Mrs.).

Anne Chatterton.

Edith Cobb (Mrs.).

Lilian Costigan (Mrs.).

Morag E. J. Denham.

Lily Dent (Mrs.).

Edna Hey.

Sarah Hood.

Vera Ledger.

Winifred Lourie.

Margaret McCluskey (Mrs.).

Eva McVay (Mrs.).

Georgina Moore.  
 Elsie Reed.  
 Alice Steele (Commenced 1.4.60).  
 Elsie Wilkinson.  
 Ann Winsper (Mrs.).

CLINIC ATTENDANTS :—

Freida Parsons (Mrs.).  
 Jane Pallister.

SCHOOL DENTAL ATTENDANTS :—

Ann Armstrong (Commenced 15.2.60).  
 Mary J. Armstrong (Mrs.).  
 Janet Benson.  
 Sarah E. Bland.  
 Jeanette I. Bradbury.  
 Dorothy H. Charlton (Commenced 26.9.60).  
 Edith Clennell (Commenced 28.9.60).  
 Priscilla Dawson (Mrs.)  
 Sheila Gillis (Commenced 1.2.60).  
 Norah Hourigan (Commenced 3.10.60).  
 Marion W. Jamieson.  
 Jane Martin (Mrs.) (Commenced 1.11.60).  
 Mary Martin.  
 Anne C. Pace (Resigned 24.9.60).  
 Edith Parrish (Mrs.) (Commenced 26.9.60).  
 Nellie Porter.  
 Mary Purvis (Mrs.)  
 Olive Savage.  
 June M. Smallwood.  
 Charity S. Smart (Mrs.)  
 Lily Walker.  
 Jane I. Watson (Mrs.)  
 Jane Watson (Mrs.) (Commenced 20.6.60).

OFFICE STAFF :—

James Taylor.  
 Harry Allen, B.A.  
 Norman Lee.  
 Joseph Hutchinson.  
 \*Claude S. Gooch.  
 Matthew R. Tate.  
 Arthur Bastain, A.C.C.S.  
 \*Bewick Brown.  
 Joseph Willis.  
 Ernest Sanderson.  
 †\*Joseph Perkins.  
 James T. Brownlow.  
 Leslie Bryan.  
 John G. Glenwright.  
 Richard Watson.  
 Albert Toal.  
 †Jack Grieveson.  
 Henry H. Marriner.  
 \*Bryan Stoddart.  
 \*Brian Murphy.  
 Brian Hewitt.  
 John H. Corbett.  
 Donald W. Bartlett.

Jonathan Ridley (Commenced 4.4.1960).  
 † David Local.  
 Joyce Heslop.  
 Mary I. Sanderson (Mrs.) (Left 30.6.1960).  
 Esther Chicken.  
 \* June Hodgson.  
 Kathleen Blanchard.  
 Pauline R. Hatton.  
 Margaret Thompson (Commenced 18.7.1960).  
 Violet Hunter (Mrs.).  
 Elizabeth Newby (Mrs.).  
 Susannah Hutchinson.  
 Margaret Logan.

\* Transferred from Department during year.  
 † Transferred to Department during year.

### COURSES AND CONFERENCES.

Members of the School Health Service staff attended courses and conferences as follows:—

National Association of Mental Health, Annual Conference, London—24th-25th March, 1960.

Dr. G. H. Shanley.

British Psychological Society, Annual Conference, Hull—7th-11th April, 1960.

Mr. J. S. Aston.  
 Mr. J. Gordon.

Royal Society of Health Congress, Torquay—25th-29th April, 1960.

Dr. G. H. Shanley.

Society of Medical Officers of Health—Refresher Course for Public Health Dental Officers, Birmingham—29th-30th April, 1960.

Mrs. M. M. Lishman.  
 Mrs. N. Lockett.

Society of Medical Officers of Health—Weekend Seminar, Wansfell, Essex.  
 17th-19th June, 1960.

Dr. W. E. Rigby.

British Dental Association, Annual Conference, Edinburgh—11th-15th July, 1960.

Mrs. M. M. Lishman.  
 Mr. C. S. Matthews.

Tavistock Institute of Human Relations, Intermediate Training Course in Rorschach Method, London, 15th—19th August, 1960.

Mr. F. G. Mahoney.

Ministry of Education Short Course on the teaching of Backward Children, Reading University, 29th August—9th September, 1960.

Mr. J. Sellars.

Special Schools Association Conference, Glasgow—31st August—3rd September, 1960.

Dr. W. E. Rigby.

College of Speech Therapists, Area Refresher Course, Nottingham University, 8th-10th September, 1960.

Miss C. Thom.

National Association for Mental Health, Course in Problems of growth and development in Childhood, Newcastle upon Tyne—19th-24th September, 1960.

Dr. S. M. C. Thompson.

Dr. A. S. M. Wilson.

National Association for Mental Health, Course for Medical Officers on Educationally Sub-normal Children and Mental Defectives, London. 26th September-14th October, 1960.

Dr. M. M. Eustace.

## SCHOOL HYGIENE AND SANITATION.

Alterations continue to take place in the older type of school to bring them into line with the Standards for School Premises Regulations and additional schools were supplied with hot water service during the year bringing the total number of schools in the county with hot water installations to 337.

Suitable accommodation is provided in all new schools for the inspection of pupils by doctors, dentists and nurses, but this is lacking in most of the older schools, and use is made of the head teacher's room or a class room. In some cases it is necessary to hire other premises for this purpose.

The provision of individual towels in separate containers continues to work satisfactorily. Wherever an outbreak of Sonne dysentery is suspected recourse is made to paper towels which can be burned.

### 1. New schools and colleges with hot water installation opened during 1960 :—

County Primary	...	...	...	...	...	4
County Secondary	...	...	...	...	...	7
Further Education	...	...	...	...	...	0
Special	...	...	...	...	...	1

### 2. Number of schools other than new schools which have had a hot water supply installed during 1960:—

Completed	...	...	...	...	...	...	9
In hand but not completed by 31st December	...						22

### 3. Total number of schools with hot water installations on the 31st December, 1960—337.

## MEDICAL INSPECTION.

Routine medical inspection is still being carried out in three groups:—

Entrants.

Ten Plus.

Leavers.

It will be noted from the figures given below that the total of routine medical inspections for 1960 is approximately the same as for 1959 which showed a reduction on previous years. This decrease in the number of routine inspections was due to the time spent by the School Medical Officers on hearing surveys and B.C.G. vaccinations and also to the fact that where Officers left the service it was difficult to obtain replacements. Consequently there were periods when no examinations could be carried out in certain areas. In 1958 there was an increase in the number of special examinations which has been maintained.

Year	Routine Medical Inspection.	Special Inspection.
1957	47,782	7,542
1958	45,758	11,964
1959	38,056	12,034
1960	38,104	12,618

### *Physical Condition.*

The figures given below are derived from the individual assessments of all the School Medical Officers and as there are no fixed standards deviations of opinion are inevitable. Nevertheless I feel that reliable conclusions can be drawn from this information and it is interesting to see that the percentage found "unsatisfactory" has been reducing each year and has dropped from 3.9% in 1957 to 2.3% in 1960.

### CLASSIFICATION OF PUPILS INSPECTED AT PERIODIC MEDICAL INSPECTIONS, 1958-60.

Year.	Number of Children Inspected.	Satisfactory		Unsatisfactory	
		Number.	Percentage.	Number.	Percentage.
1957 ...	47,782	45,943	96.1	1,839	3.9
1958 ...	45,758	44,419	97.1	1,339	2.9
1959 ...	38,056	37,002	97.2	1,054	2.8
1960 ...	38,104	37,243	97.7	861	2.3

### *Defects found at Medical Inspections.*

It will be seen from the table on Page 13 that the number and type of defects found in 1960 correspond closely with those noted in 1959. The only significant differences are an increase in the number of defects of the eyes and ears and a decrease in the number of defects of the nose and throat.

RETURN OF DEFECTS FOUND AT MEDICAL INSPECTIONS, 1960.

Requiring Treatment	Requiring Observation
---------------------	-----------------------

Defects of:—		Requiring Treatment						Requiring Observation					
		Total Number of Periodic Inspections.		Total Number of Special Inspections.		Total Number of Periodic Inspections.		Total Number of Special Inspections.		Total Number of Periodic Inspections.		Total Number of Special Inspections.	
1960—38,104		1960—12,618		1960—38,104		1960—12,618		1959—38,056		1959—12,334		1959—38,056	
Number of Defects	1959	1960	1959	1960	1959	1960	1959	1960	1959	1960	1959	1960	1959
<b>Skin</b>	...	...	...	...	...	...	...	...	...	...	...	...	...
<b>Eyes:—</b>	a. Vision	...	...	...	...	...	...	...	...	...	...	...	...
b. Squint	...	...	...	...	...	...	...	...	...	...	...	...	...
c. Other	...	...	...	...	...	...	...	...	...	...	...	...	...
<b>Ears—</b>	a. Hearing	...	...	...	...	...	...	...	...	...	...	...	...
b. Otitis Media	...	...	...	...	...	...	...	...	...	...	...	...	...
c. Other	...	...	...	...	...	...	...	...	...	...	...	...	...
<b>Nose and Throat</b>	...	...	...	...	...	...	...	...	...	...	...	...	...
<b>Speech</b>	...	...	...	...	...	...	...	...	...	...	...	...	...
<b>Lymphatic Glands</b>	...	...	...	...	...	...	...	...	...	...	...	...	...
<b>Heart</b>	...	...	...	...	...	...	...	...	...	...	...	...	...
<b>Lungs</b>	...	...	...	...	...	...	...	...	...	...	...	...	...
<b>Development—</b>	...	...	...	...	...	...	...	...	...	...	...	...	...
a. Hernia	...	...	...	...	...	...	...	...	...	...	...	...	...
b. Other	...	...	...	...	...	...	...	...	...	...	...	...	...
<b>Orthopaedic—</b>	...	...	...	...	...	...	...	...	...	...	...	...	...
a. Posture	...	...	...	...	...	...	...	...	...	...	...	...	...
b. Feet	...	...	...	...	...	...	...	...	...	...	...	...	...
c. Other	...	...	...	...	...	...	...	...	...	...	...	...	...
<b>Nervous System—</b>	...	...	...	...	...	...	...	...	...	...	...	...	...
a. Epilepsy	...	...	...	...	...	...	...	...	...	...	...	...	...
b. Other	...	...	...	...	...	...	...	...	...	...	...	...	...
<b>Psychological—</b>	...	...	...	...	...	...	...	...	...	...	...	...	...
a. Development	...	...	...	...	...	...	...	...	...	...	...	...	...
b. Stability	...	...	...	...	...	...	...	...	...	...	...	...	...
<b>Abdomen</b>	...	...	...	...	...	...	...	...	...	...	...	...	...
Other Defects or Diseases ...	...	...	...	...	...	...	...	...	...	...	...	...	...
<b>Totals</b>	8,909	9,435	1,723	1,881	10,632	11,316	11,800	11,491	2,396	2,142	14,196	13,633	

## MEDICAL TREATMENT.

A full list of school clinics, speech clinics and child guidance centres showing details of services available and the day of attendance of staff is given in Appendix III.

Most of the school clinics are open every day, 9.30 a.m. to 11.30 a.m. and 1.30 p.m. to 3.30 p.m. for the treatment of minor ailments.

### *Ultra Violet Ray Treatment.*

Ultra violet ray sessions are held at most clinics once or twice weekly, the nurse giving treatment at the direction of the school medical officer. Although the swing of the pendulum has gone against the use of this form of therapy, some school medical officers think there are still cases where benefit does accrue.

338 pupils, referred by school medical officers, hospitals and medical practitioners, attended for sun-ray treatment, a total of 4,854 attendances being made.

### *Skin Diseases.*

A total of 1,829 children received treatment during 1960, compared with 1,858 cases in 1959, and 2,016 in 1958.

### *Defective Vision.*

A total of 12,180 children were examined in the county for refractive error compared with 12,865 in 1959, 3,114 being examined by the school oculists.

Spectacles were prescribed for 10,887 children and supplied by opticians through the Supplementary Ophthalmic Service.

### *Diseases and Defects of Ear, Nose and Throat.*

2,293 school children were treated and of that number 1,342 received operative treatment.

### *Audiometry.*

Throughout the year the work of testing infants of the 5-7 years age group has continued. I believe that an effective way to find the children suffering from hearing defects is by going into the school and conducting the sweep check.

Unfortunately as there are only two Audiometrists it is not possible to check all children in this age group each year.

Details are given below of the tests carried out by the Audiometrists during 1960.

*Sweep test in schools.*

					<i>Boys.</i>	<i>Girls.</i>	<i>Total.</i>
Tested	...	...	...	...	5,451	5,317	10,768
Failed	...	...	...	...	309	292	601
%	...	...	...	...	5.66%	5.49%	5.58%

*Audiometric Testing in Clinics.*

<i>Total Attendances.</i>	<i>Failed to attend after two appointments.</i>	<i>Ref. to E.N.T. Surgeon.</i>
1,539	349	472

*Hearing Aids.*

Progress reports are received from head teachers on children in ordinary schools who have hearing aids. These children are also seen periodically by school medical officers. This ensures that any lack of educational progress and any apparent worsening of the condition can be investigated.

26 pupils were issued with hearing aids during the year through the National Health Service, making a total of 143 children with hearing aids at the end of 1960.

In addition one hearing aid was provided commercially as a suitable aid could not be supplied through the National Health Service.

*Orthopaedic and Postural Defects.*

350 children received treatment in hospitals or at their out-patient clinics. Information received about these children is forwarded to the School Health Service and to the general medical practitioners.

*Vaccination against Poliomyelitis.*

The arrangements made by the County Medical Officer of Health for children to be vaccinated against poliomyelitis were continued during the year.

*B.C.G. Vaccination.*

Arrangements made by the County Medical Officer for B.C.G. vaccination of school leavers continued as in previous years. School Medical Officers assisted when required, in many of the areas.

13,163 children presented themselves for vaccination. 2,781 (21.1%) were positive reactors to the skin test and 9,557 (72.6%) were negative to the test. The remainder were absent on the date of reading the test.

All the negative reactors were given B.C.G. except for 105 children for whom this action was inadvisable. Details are given in appendix V.

*Co-operation with Medical Practitioners, Hospitals and Other Health Services.*

Close co-operation with the family doctor and the hospital service has been maintained as in the past, and has contributed much to the efficiency of the service and to the experience of all concerned.

Thanks are especially due to the consultants and specialists of the Regional Hospital Board and the Department of Child Health, who have supplied 2,129 reports this year on children who have been referred to them for examination and any necessary treatment.

### INFECTIOUS DISEASES.

The following figures shew the number of cases notified to this department.

<i>Scarlet Fever.</i>	<i>Dysentery.</i>	<i>Measles.</i>	<i>Infective Hepatitis.</i>	<i>Poliomyelitis.</i>
238	148	840	185	2

With the exception of the Infective Hepatitis the other diseases occurred throughout the county and were not in the nature of an epidemic. Of the 185 cases of Infective Hepatitis 166 occurred in the last eight months of the year and 63 were from Hartlepool.

### HANDICAPPED PUPILS.

The provision of special educational treatment for handicapped pupils who require something different from ordinary schooling is one of the priorities in the County's development scheme.

Figures showing the distribution of children in the various categories appear below:—

### *Blind Pupils.*

### *Partially Sighted Pupils.*

No. of children examined by Consultant Ophthalmologists during year ... ... ... ... ... ... ... ... ...	3
No. of children examined by School Medical Officers during year ...	6
School Medical Officers' recommendations :—	
(a) Ordinary schools ... ... ... ... ...	2
(b) Special schools for partially sighted ... ... ...	4
(c) Education otherwise than at school ... ... ...	—
(d) Re-examination ... ... ... ...	—
No. in special schools at end of year ... ... ... ...	22
No. receiving education otherwise than at school ... ... ...	2
No. requiring places in special schools ... ... ... ...	8

*Deaf.*

No. of children examined during the year	...	...	...	...	3
School Medical Officer's recommendations :—					
(a) Special Schools for Deaf Children	...	...	...	...	3
(b) Home Tuition	...	...	...	...	—
No. in special schools at end of year	...	...	...	...	107
No. receiving education otherwise than at school	...	...	...	...	—
No. requiring places in special schools	...	...	...	...	4

### *Partially Deaf.*

No. of children examined by School Medical Officers during the year	6
School Medical Officers' recommendations :—	
(a) Ordinary schools      ...      ...      ...      ...      ...      ...	3
(b) Special schools for partially deaf pupils      ...      ...      ...	3
(c) Special Schools for other categories      ...      ...      ...	—
No. in special schools at end of year      ...      ...      ...      ...	26
No. receiving education otherwise than at school      ...      ...      ...	—
No. requiring places in special schools      ...      ...      ...      ...	3

*Physically Handicapped.*

No. of children examined during the year	...	...	...	...	...	60
No. of children re-examined during the year	...	...	...	...	...	129
School Medical Officers' recommendations :—						
(a) Ordinary Schools	...	...	...	...	...	62
(b) Special Schools for physically handicapped children	...	...	...	...	...	6
(c) Special Schools for other categories	...	...	...	...	...	5
(d) Hospital Special Schools	...	...	...	...	...	—
(e) Section 56—Home Tuition	...	...	...	...	...	106
(f) Unsuitable for any school	...	...	...	...	...	3
(g) Re-examination...	...	...	...	...	...	6
(h) Unsuitable for any education at present	...	...	...	...	...	1
No. in special schools at end of year	...	...	...	...	...	70
No. receiving education otherwise than at school	...	...	...	...	...	63
No. requiring places in special schools	...	...	...	...	...	11

*Delicate.*

No. of children examined during the year	...	...	...	...	...	82
No. of children re-examined during the year	...	...	...	...	...	50
School Medical Officers' recommendations :—						
(a) Ordinary Schools	...	...	...	...	...	53
(b) Special Schools for Delicate Children	...	...	...	...	...	47
(c) Section 56—Home Tuition	...	...	...	...	...	29
(d) Re-examination...	...	...	...	...	...	1
(e) Special schools for other categories	...	...	...	...	...	1
(f) Unsuitable for any education at present	...	...	...	...	...	1
No. in special schools at end of year	...	...	...	...	...	173
No. receiving education otherwise than at school	...	...	...	...	...	13
No. requiring places in special schools	...	...	...	...	...	25

*Epileptic.*

No. of children examined during the year	...	...	...	...	...	6
No. of children re-examined during the year	...	...	...	...	...	8
School Medical Officers' recommendations :—						
(a) Ordinary School	...	...	...	...	...	5
(b) Special School for Epileptics	...	...	...	...	...	—
(c) Special School for other categories	...	...	...	...	...	2
(d) Re-examination...	...	...	...	...	...	—
(e) Home tuition	...	...	...	...	...	5
(f) Unsuitable for school	...	...	...	...	...	2
No. in special schools at end of year	...	...	...	...	...	5
No. receiving education otherwise than at school	...	...	...	...	...	4
No. requiring places in special schools	...	...	...	...	...	1

### *School Psychological Service.*

No. of children found to require further detailed examination by Educational Psychologists ... ... ... ... ...	969*
No. recommended for adjustment classes/remedial teaching ...	168
No. recommended for no further action ... ... ... ...	266
No. recommended for examination by School Medical Officers ...	345
No. recommended for re-examination ... ... ... ...	174
No. recommended for Child Guidance ... ... ... ...	16

\*This figure does not represent the total number of children seen in schools. The vast majority of such cases can be dealt with on the spot by advice to Head Teachers.

### *Educationally Sub-normal Children.*

No. of children examined during the year ... ... ...	342
School Medical Officers' recommendations :—	
(a) Ordinary schools ... ... ... ...	7
(b) Special education in ordinary schools ... ... ...	29
(c) Residential special schools for educationally sub-normal pupils ... ... ... ...	20
(d) Day Special schools for educationally sub-normal pupils ...	62
(e) Either Day or Residential Special schools for Educationally sub-normal pupils ... ... ... ...	105
(f) Special schools for other categories ... ... ...	5
(g) Section 56—Home tuition ... ... ...	4
(h) Unsuitable for education at school ... ... ...	66
(i) Supervision after leaving school ... ... ...	35
(j) Re-examination ... ... ... ...	9

### *Maladjusted Children.*

No. of children who attended Child Guidance Centres during the year	93
No. of children examined by School Medical Officers during the year	4
School Medical Officers' recommendations :—	
(a) Special Schools for Maladjusted ... ... ...	4
(b) Special Schools for other categories ... ... ...	—
(c) Special Education in ordinary schools ... ... ...	—

### *Diabetic and Epileptic Holiday Camps.*

Arrangements were made for children to attend holiday camps under the auspices of the British Diabetic Association and the British Epilepsy Association as follows :—

#### *The British Diabetic Association.*

Dorton House, Aylesbury ... ... ... ...	1
Shaftesbury House, Rustington, Sussex ... ... ...	1
Castlecraig, Peebles ... ... ... ...	6

#### *The British Epilepsy Association.*

Evenley Hall Holiday Camp, Brackley, Northants. ... ...	1
---	---

*Convalescent Treatment.*

Arrangements were made in six cases through the Invalid Children's Aid Association for children to have periods of convalescence at Convalescent Homes.

### MISCELLANEOUS EXAMINATIONS.

Medical examinations other than periodic examinations in schools were undertaken as in previous years. Details are given below. (Figures in brackets refer to 1959).

(a) Examination under Section 18 of the Children and Young Persons Act, 1933.

These examinations are of children between the ages of 14 and 16 and are required to determine the fitness of children to receive employment licences and badges.

Part-time employment is usually that of newsboy, errand boy or shop assistant.

No. of children examined	...	...	...	...	456	(537)
No. of children unfit to be employed	...	...	...	...	None	(2)

(b) Examination under Section 22 of the Children and Young Persons Act, 1933.

These are examinations of children desiring to take part in entertainments.

No. of children examined	...	...	...	...	...	5	(16)
No. of children unfit	...	...	...	...	...	None	(None)

(c) Juvenile Courts.

No. of children or young persons examined arising out of proceedings in Juvenile Courts	...	...	17	(21)
---	-----	-----	----	------

(d) Candidates for Royal Air Force

Apprentices or Boy Entrants	...	...	...	6	(8)
-----------------------------	-----	-----	-----	---	-----

(e) Candidates for admission to Courses of Training for Teaching and to the Teaching Profession

653 (645)

Members of the staff have given talks to parent-teacher associations and other organisations.

## SPECIAL SCHOOLS FOR DELICATE PUPILS.

### (a) *Redworth Hall Residential School.*

The number of children attending the school was 47 including 1 from another Authority.

### (b) *Windlestone Hall Residential School.*

The number of children attending the school was 60 including 7 from other Authorities.

## CHILD GUIDANCE SERVICES.

The Child Guidance Services in the County have once more been extended. For the first time we have our own Child Guidance Clinic team, as well as an established School Psychological Service. The scope of our Child Guidance Clinic is limited by the fact that only two psychiatric sessions are available, and this means that we are still largely dependent upon the services of the clinics in Sunderland, Darlington, Stockton and Newcastle upon Tyne.

### *The School Psychological Service.*

Mrs. Currie, Senior Educational Psychologist, reports:—

The School Psychological Service has been concerned throughout the year with psychological testing, both in connection with the ascertainment of educationally sub-normal children and also in connection with individual children who are presenting problems of learning or social adjustment in school. The progress of children in attendance at special schools for educationally sub-normal pupils has once more been kept under review by means of educational tests administered by members of the School Psychological Service.

In addition to the purely diagnostic work already mentioned, the Educational Psychologists have provided a service of specialist remedial teaching for children whose educational retardation is due primarily to emotional disturbance, as distinct from innate lack of ability or school absence. In these cases it is considered that the children are best helped by a strictly individual approach in a psycho-therapeutic setting.

Following our observations in earlier reports on the uneven use of the School Psychological Service by Head Teachers, we have arranged this year for visits to most of the schools in the area, to discuss individually the scope of the service. As a direct result of these visits many more children have been referred from the schools.

During the year the establishment of Educational Psychologists was increased, so that we now have eight Assistants—four Grade I, four Grade II. Mr. J. Sellars, who had been the Senior Educational Psychologist since the service began in this County in 1949, resigned his post on the 30th November, 1960. We should like to take this opportunity to express our appreciation of Mr. Sellars' service to the County during his appointment. Throughout the year two of the Educational Psychologists have worked for four sessions each week as members of the Child Guidance Clinic team.

### *The Child Guidance Clinic.*

Dr. Walley reports:—

When fully staffed the Clinic, which is open for two sessions a week, is staffed by a team comprising the Psychiatrist, Educational Psychologist and Social Worker, all of whom play their part in the investigation and treatment of each child seen. In addition a junior Educational Psychologist has attended, mainly for observation and training purposes.

During the first nine months since its inception on 7th March, 1960 the clinic has been open for a total of seventy sessions, with a total number of attendances of 142. 46 children were fully investigated in that period and treatment commenced where indicated, while an additional 5 were seen by the Educational Psychologist but for various reasons were either not proceeded with or deferred till later. It must be noted that in general a first visit to the clinic requires nearly a full session for adequate investigation, whilst treatment requires at least an hour on each visit.

It is not possible to enumerate the reasons for referral in every case as many children had more than one symptom. 7 patients were seen in order to supply a psychiatric report for the assistance of the Magistrates in the Juvenile Court and the others the initial request came from the school authorities, family doctors or probation officers. All referrals were dealt with via the School Medical Service in liaison with the child's family doctor. By far the largest incidence of symptoms was in the field of anti-social behaviour.

As a broad generalisation, most of the symptoms causing the children to be brought to the clinic could be grouped under four headings. In order of frequency these were:

- (1) Stealing.
- (2) Backwardness in school work not accounted for by lack of intelligence.
- (3) Aggressiveness, bullying, destructiveness and cruelty.
- (4) Unmanageable behaviour at home or at school.

11 children out of the 46 had been before the juvenile courts, several of them on more than one occasion. This undue proportion of children whose symptoms have a high nuisance value is almost invariably encountered in a new clinic. There was similarly a high proportion of children whose symptoms had been presented in acute form several years before help was sought.

#### *Causes of disturbed behaviour.*

All children are individuals and have individual problems so it is not reasonable to make dogmatic statements on the causes of disturbed behaviour which can be applied to every case. Nevertheless certain factors came up with such frequency as to be worth special consideration.

##### *(i) Family disturbances.*

15 of the 46 children were either no longer living with the parents or with only one. It is noted that deprivation of a parent by simple bereavement is surprisingly well tolerated by a child and only one (who was, in fact, mentally subnormal) came in this category. In all the other 14 the home had been broken up due to marital difficulties or parental neglect. In 7 other cases one of the parents at least had shown mental instability serious enough to require psychiatric and generally hospital treatment.

##### *(ii) Failure of Parental Control.*

A very high proportion of the other children seemed to have no sense of respect for other's feelings or rights and it was often found that from early age the parents had tended to indulge the child's every whim. Some of this was understandable when the parents recalled their own childhood in the depression when they had nothing, but the effect on the child was to produce an attitude in which self-indulgence was paramount. Many parents,

similarly, were unable to tolerate the young child's distress when frustrated and therefore he never learnt that frustration is something that everyone has to put up with at times. Very few realised that truly loving parents, who have their child's happiness at heart, will train him to get on happily with his fellow men. Another factor in several cases was the refusal of the father to take any responsibility for the training of his children which was all left to the mother or in other cases considered to be the sole responsibility of the school. A history of anti-social conduct in other members of the family was frequently found in this type of child.

(iii) *Inadequacies in the Child.*

It is not suggested that in all or even the majority of cases parental inadequacies were the sole cause of the child's difficulties. Many of the parents and practically all of the foster parents were tackling a very difficult task with intelligence and understanding. Again of the 46 children considered, 5 were mentally subnormal and a further 14 so dull that their lack of intelligence was a major factor in their difficulties. (Only 7 of the patients could be described as really bright but the majority, 20, ranged from dull average to good average intelligence). Of the 15 children from broken homes (most of whom fell into this last group) many had had their personality development so warped by their early experiences that the improvement that most of them showed was a real tribute to those who now cared for them.

It is of interest that physical illness was rarely of importance except where it had lead to the over-indulgence of the child by his anxious parents.

*The work of the Psychologist.*

Of the total number of 51 cases seen by the Educational Psychologist, approximately one sixth (8), had the home addresses in the Durham City area. The remaining five-sixths were referred from parts of the County considerable distances from the centre.

Initial school visits for psychological assessment and discussion of individual problems with teaching staff were made on 48 occasions. An additional 22 school visits were necessitated for follow-up purposes concerning children attending the Child Guidance Centre regularly.

Due to the absence of a Psychiatric Social Worker during 1960 it was necessary to continue a certain amount of case-work and 16 home visits were made during this period by the Psychologist.

On the 142 clinic appointments for psychological assessment, 52 were for first appointments when further diagnostic testing was found helpful after the initial school visit. The remaining 90 attendances entailed either more intensive projective assessment, therapy or remedial teaching or combinations of these.

### SPEECH THERAPY.

Miss Thom, Senior Speech Therapist reports:—

				1960	1959
No. of attendances made by children ...	...	...	...	5,238	5,781
No. of children attended during the year	...	...	...	624	538
No. of children attending at present ...	...	...	...	335	315
No. of new cases seen ...	...	...	...	196	
No. of children discharged on account of treatment completed ...	...	...	...	172	140
non-attendance ...	...	...	...	74	33
No. of children transferred to other clinics	...	...	...	11	21

1960 proved to be an unsettled year for Speech Therapy in Durham County.

Mrs. Briscoe, in the Durham and Bishop Auckland Clinics, resigned early in the year and was replaced by Mrs. Tarrat who remained only from April until May. Speech Therapy in this area was then in abeyance until September when Miss Diane M. Eady and Miss Sheila Ellis were appointed, with headquarters at Bishop Auckland and Stanley respectively. Both these Therapists also work sessions at Durham School Clinic.

In September, the speech department at Horden was transferred to the new Health Centre at Peterlee. Unfortunately Mrs. Milligan who was working in the area left at that time and Speech Therapy both there and at Hartlepool has fallen into abeyance. Her other Clinic at Wingate has remained open for one day each week but these two sessions are inadequate for so large an area.

The service at the Houghton, Seaham and Billingham Clinics has remained constant throughout the year, but in each case, were it not for the lack of Therapists, the number of sessions spent in each would be increased.

In December I was appointed to the post of Senior Speech Therapist but continued to work in my former Clinics but for fewer sessions.

The year has ended with three full-time Speech Therapists and one working part-time as against an establishment of eight, thus the difficulties can be recognised. Children referred to the Clinics are seen as soon as possible. More Speech Therapists need to be attracted to the County so that the service can be expanded to cover all areas adequately.

### DENTAL SERVICE.

Mrs. Lishman, Principal School Dental Officer reports:—

Once more the staffing position has improved and this has enabled second surgeries to be opened at the following clinics:—

Durham.  
Houghton-le-Spring.  
Peterlee.  
Billingham.

At the end of 1959 there were nine full-time and thirteen part-time dental officers—whereas at the end of 1960 there were fourteen full-time and twenty-five part-time. During the year two part-time officers became full-time which is very gratifying but unfortunately one full-time officer resigned and one is serving in Her Majesty's Forces. We also lost the services of four part-time officers.

The second mobile dental van was completed and put into service in the Teesdale area in July and since September has been operated by a full-time Dental Officer. As a result the school children in the following places have been inspected and treated:—Langleydale, Piercebridge, High Coniscliffe, Gainford, Staindrop and Barnard Castle.

The provision of this van has been further justified as the acceptance rate for treatment has been around 80%. The first mobile van has also had the services of a full-time Dental Officer since November and this has enabled the children in the Deerness Valley and Weardale to be inspected and treated.

Our thanks are again due to the County Surveyor and County Architect for all their help in connection with the Mobile Vans.

The provision of a third mobile van is under consideration, this to be used for the inspection and treatment of the children in the special schools and the Sedgefield area.

As the total of full-time and part-time dental officers amounted to  $21\frac{1}{2}$  in terms of full-time Dental Officers the Committee approved the raising of the establishment of Dental Officers from 24 to 30 and the number of Dental Attendants from 26 to 32.

### *Inspection and Treatment.*

During 1960 five thousand more children were inspected than in 1959. It is interesting to note that only 475 more teeth were extracted but 4,484 more fillings were done and in addition less dentures were fitted. This shows the very great trend towards conserving teeth rather than having them extracted and this is the main aim of the School Health Service. 4,494 general anaesthetics were administered, an increase of 717 as compared with the previous year.

Owing to a lengthy waiting list the Newcastle Dental Hospital has been unable to give consultant advice on Orthodontic treatment and the number of cases undertaken during 1960 has therefore decreased by 88.

Our thanks are again due to the Newcastle Dental Hospital, Sunderland General Hospital and Middlesbrough North Ormesby Hospital for the help they have given us during the year.

### PROVISION OF SCHOOL MEALS.

Since the publication of the last report, Kitchen Dining Rooms have been opened at the following new Schools: —

- Spennymoor West Modern School.
- Newton Aycliffe Stephenson Way County Junior Mixed School.
- Sherburn Modern School.
- Framwellgate Moor County Infants' School.
- Sedgefield Modern School.
- Billingham Low Grange County Infants' School.
- Hartlepool St. Peter's R.C. Modern School.
- Hebburn R.C. Grammar/Technical School.
- Hebburn Toner Avenue County Infants' School.
- Birtley South Modern School.

In February, 1960, New Silksworth Central Kitchen was closed down. Schools formerly supplied by this kitchen now receive meals from nearby Central Kitchens.

Plans have been approved for the provision of Kitchen Dining Rooms at the undermentioned new schools:—

Durham Gilesgate Modern School.  
 Newton Aycliffe No. 2 Modern School.  
 Felling Leam Lane Modern School.  
 Hurworth Modern School.  
 Billingham Grammar/Technical School.  
 Billingham Low Grange Modern School.  
 Egglestone Modern School.  
 High Usworth Modern School.  
 Peterlee Dene House Modern School.  
 Peterlee Grammar/Technical School.  
 Billingham Day School.  
 Hare Law Day School.  
 Pelton Modern School.  
 Eppleton Modern School.  
 Felling Leam Lane R.C. Primary School.  
 Billingham Holy Rosary R.C. Primary School.  
 Peterlee Shotton Hall County Infants' School.  
 Seaham Grammar School.  
 Cleadon County Junior Mixed School.  
 Durham Gilesgate R.C. Primary School.  
 Ryhope Grammar School (a new kitchen is included in extensions).  
 Peterlee Shotton Hall Modern School.  
 Jarrow Dunn Street County Junior Mixed School.  
 Peterlee Shotton Hall County Junior Mixed School.  
 Jarrow St. Mary's R.C. Junior Mixed School.  
 Houghton-le-Spring Modern School (a new kitchen will be provided in extensions).  
 Durham Girls' Grammar School (a new kitchen is included in extensions).

*Statistics showing the position on the 31st December, 1960.*

Central Kitchens	...	...	...	...	41
School Canteens :—					
Primary and Modern	...	...	...	...	74
Grammar	...	...	...	...	17
Nursery	...	...	...	...	20
School Dining Centres	...	...	...	...	499
Free Meals	...	...	...	...	2,959,478
Meals for payment	...	...	...	...	10,590,194

BOROUGH OF STOCKTON-ON-TEES  
EDUCATION COMMITTEE.  
(Excepted Division).

---

ANNUAL REPORT of the  
BOROUGH SCHOOL MEDICAL OFFICER  
H. J. PETERS, M.B., B.S., B.Hy., D.P.H., D.P.A.  
for the YEAR 1960.

*Details associated with Education in the Borough.*

Number of Schools	...	...	...	...	...	...	...	...	...	...	...	33
These include 22 Primary Schools, seven Secondary Modern Schools (two of which were newly opened during the year) one Secondary Technical School, two Secondary Grammar Schools and one Special Open Air School for Delicate and Physically Handicapped Pupils. There are also two Nursery Classes catering for pre-school children.												

Number of children on roll	...	...	...	...	...	...	...	...	...	...	...	15,257
----------------------------	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	--------

*The Staff of the School Health Service.*

Borough School Medical Officer—Henry J. Peters, M.B., B.S., B.Hy., D.P.H., D.P.A.

School Medical Officers :—

P. N. Shutte, M.R.C.S., L.R.C.P. Appointed 1.2.60.  
Maureen O'Gorman, L.R.C.P. & S., I., L.M.

School Dental Officers :—

Frank R. Cadigan, L.D.S., L.R.C.P. & S., L.R.F.P.S.  
Derek J. McNee, L.D.S. (Part-time). Appointed 13.12.60.

Consultant Ophthalmic Surgeon (Part-time)—A. E. P. Parker, M.B., B.S., F.R.C.S.

Consultant Nose, Throat and Ear Surgeon (Part-time)—J. H. Appleton, M.B., Ch.B., D.L.O.

Speech Therapists :—

Miss Muriel Knight.  
Mrs. E. W. Varga (Appointed 16.5.60).

Speech Specialist—Miss Harriet J. Searby. (Resigned 3.9.60).

Orthoptist—Post vacant.

Psychiatrist (Part-time)—J. R. Hawkings, M.B., D.P.M.

Educational Psychologist—Miss M. F. Wylie, M.A., Ed.B.

Social Worker—Mrs. R. C. Lyth., A.M.A.S.W.

School Nurses :—

Mrs. E. Minto, S.R.N., S.C.M.  
Mrs. E. Whitehead, S.R.N., S.C.M.  
Mrs. L. M. Stawski, S.R.N.  
Mrs. K. Cahill, S.R.N., S.C.M.  
Mrs. D. B. Morris, S.R.N.  
Mrs. M. Wain, S.R.N.

Female assistant for Open Air School (Non-nursing)—Mrs. H. A. Hedley.

School Dental Attendants :—

Miss D. Whinfield.  
Mrs. A. Hough-Grassby (Part-time). (Appointed 13.12.60).

Clerical Staff :—

Miss J. Hall.  
Mrs. J. Bulmer (Resigned 17.9.60).  
Mrs. I. Stewart.  
Miss S. Brooke. (Appointed 4.1.60).  
Miss P. Reevell. (Appointed 1.11.60).

### *Medical Inspection.*

The number of children inspected was 4,645, this total being made up of 1,546 entrants, 880 leavers and 2,219 other inspections.

3,516 children, referred by parents, teachers, school nurses or educational welfare officers were examined at "Specials".

1,064 re-inspections of children suffering from one or more defects were carried out during the year.

### *Pupils found to require treatment.*

The number of individual pupils found at Periodic Medical Inspection to require treatment (excluding Dental Disease and Infestation with Vermin) is given below.

Age Groups Inspected (by year of birth).	For Defective Vision (excluding squint).	For any other conditions.	Total individual pupils.
1956 and later	—	2	2
1955	13	64	76
1954	28	87	113
1953	6	25	30
1952	15	20	35
1951	35	61	92
1950	14	4	18
1949	13	13	25
1948	53	38	87
1947	33	17	45
1946	8	8	16
1945 and earlier	81	35	112
<b>Total</b>	<b>299</b>	<b>374</b>	<b>651</b>

The following Table shows the number of defects noted at periodic and special medical inspections as requiring treatment or needing to be kept under observation.

Defect or Disease	Periodic Inspections.		Special Inspections.	
	No. of defects.		No. of defects.	
	Requiring treatment	Requiring to be kept under observation.	Requiring treatment.	Requiring to be kept under observation.
Skin ... ... ... ... ...	16	97	24	5
Eyes—				
a. Vision ... ... ...	299	386	542	473
b. Squint ... ... ...	52	59	61	24
c. Other ... ... ...	7	22	1	3
Ears—				
a. Hearing ... ... ...	4	37	10	20
b. Otitis Media ... ...	4	25	12	11
c. Other ... ... ...	6	4	13	—
Nose and throat ... ... ...	232	120	60	39
Speech ... ... ...	24	18	12	1
Lymphatic Glands ... ... ...	1	14	—	4
Heart ... ... ...	—	27	—	11
Lungs ... ... ...	7	115	22	14
Developmental—				
a. Hernia ... ... ...	—	15	—	—
b. Other ... ... ...	4	49	4	1
Orthopaedic—				
a. Posture ... ... ...	—	10	—	1
b. Feet ... ... ...	5	27	3	4
c. Other ... ... ...	2	58	6	19
Nervous System—				
a. Epilepsy ... ... ...	2	15	4	2
b. Other ... ... ...	1	14	2	—
Psychological—				
a. Development ... ...	—	6	—	—
b. Stability ... ...	—	11	5	3
Abdomen ... ... ...	—	23	7	1
Other ... ... ...	15	14	72	103

### *Physical condition.*

The whole of the 4,645 children inspected during the year were considered to be in satisfactory physical condition.

## ARRANGEMENTS FOR TREATMENT.

### *Minor Ailments.*

Arrangements for treatment of minor ailments by the School Nurses are as in previous years. Places and times of clinics are as set out below, the children attending the clinic in or nearest to their own school.

<i>Address of Clinic.</i>	<i>School Nurse in attendance on</i>
106, Yarm Lane ... ...	... Monday, Wednesday, Friday and Saturday mornings.
78, Norton Road ... ...	... Tuesday mornings and Thursday afternoons
Frederick Nattrass School	... Monday and Friday mornings.
Portrack Primary School ...	... Monday and Friday mornings.
Newham Grange School ...	... Tuesday and Friday afternoons.
Tilery Road School ...	... Tuesday mornings and Thursday afternoons
Ragworth Primary School	... Tuesday and Friday afternoons.
Ragworth Open Air School	... Daily.

The total number of attendances at the minor ailment clinics during the year was 11,501, being 1,125 fewer than in 1959.

The following Table shows the number of defects treated during the year at the School Clinics and elsewhere.

<i>Defect.</i>						<i>Number of cases known to have been treated during the year at School Clinics and elsewhere.</i>
<b>SKIN—</b>						
Ringworm	(i) Scalp	...	...	...	...	2
	(ii) Body	...	...	...	...	12
Scabies	...	...	...	...	...	18
Impetigo	...	...	...	...	...	105
Other skin diseases	...	...	...	...	...	26
<b>EYE DISEASES—</b>						
External and other, but excluding errors of refraction and squint	...	...	...	...	...	133
<b>EAR DEFECTS</b>	...	...	...	...	...	63
<b>MISCELLANEOUS—</b>						
(e.g. minor injuries, bruises, sores, chilblains, etc.)	...	...	...	...	...	4,091

There was a definite decrease in the number of cases of ringworm of scalp and of body and also in the number of cases of scabies, as compared with 1959, but an increase in the number of cases of impetigo and minor skin affections.

*Visual Defects and External Eye Disease.*

The Consultant Ophthalmic Surgeon continued to attend the School Clinic, 78, Norton Road, two sessions per week in 1960. 856 children attended for refraction, glasses being prescribed for 555 of those examined. The Head Teachers were notified regarding those for whom glasses were prescribed.

Operative treatment for correction of squint was recommended in eleven cases.

One partially sighted child was recommended for admission to a special residential school.

Two blind children are at residential special schools, and one blind child is awaiting admission to a Sunshine Home.

Two partially sighted children who are awaiting vacancies in a special residential school expect to be admitted in January, 1961.

The School Nurses continued to visit schools to give vision tests to children not medically inspected during the previous twelve months and not due for examination in the near future. Children who appeared to have defective vision or squint were offered the facilities of the ophthalmic clinic.

*Orthoptic Clinic.*

As there was still no Orthoptist available, arrangements made the previous year for suitable squint cases to have temporary occlusion of one lens were continued. This was done under the supervision of the Consultant Ophthalmic Surgeon.

**NOSE AND THROAT DEFECTS.****EAR DISEASE AND DEFECTIVE HEARING.**

No ear, nose and throat sessions were held from June to September, owing to the illness of the Consultant Aural Surgeon, but during the rest of the year sessions were held approximately once a month. 133 children, referred because of ear disease, defective hearing, enlarged tonsils and adenoids and other naso-pharyngeal defects, were examined, 72 of these being recommended for operative treatment.

Four children (two of whom were pre-school children) were recommended for hearing aids. The two pre-school children were also recommended for education in a special school.

### *Hearing Aids.*

21 children attending maintained schools have hearing aids. Those in attendance at schools in the town are kept under observation by the School Nurses.

### *Deaf Children - Special Schools.*

Ten deaf and five partially deaf children attend Middlesbrough School for the Deaf and three children are at Residential Schools for the Deaf.

One deaf child and two partially deaf children are awaiting admission to Middlesbrough School for the Deaf.

### *Gramophone Audiometer.*

Group audiometer tests were carried out in all junior departments. 1,202 children were tested, almost all in the nine-year-old group. 130 were referred for re-test and 22, whose results were still unsatisfactory, were given appointments for examination by the School Medical Officer.

Of 21 children examined by the School Medical Officer, 9 were found to have good hearing, two were recommended for treatment of discharging ears or of wax, nine were referred for examination by the Consultant Aural Surgeon and one was referred for observation.

Of those referred to the Consultant Aural Surgeon, four were recommended for operative treatment, one was recommended for X-ray of sinuses, one was advised to sit at the front of the class and one was noted to be kept under observation.

Head Teachers are notified of any children who are partially deaf, and who ought to be sitting near the front of the class.

## ORTHOPAEDIC AND POSTURAL DEFECTS.

Children needing treatment are in most cases referred, through their own doctor, to the Orthopaedic Department at one of the local hospitals.

Five children were treated at Thornaby School Clinic, where there is an out-patient clinic for children discharged from the Adela Shaw Orthopaedic Hospital.

Arrangements were made for one child with mild postural defect to have special exercises at school during physical training sessions, two schools having facilities for this to be done.

Four physically handicapped children and two delicate children are at Residential Special Schools.

Three spastic children are to be admitted in January, 1961 to the new Tees-side Spastic Treatment Unit in Middlesbrough.

### HOME TUITION.

At the end of the year, one physically handicapped child and one maladjusted child were receiving home tuition.

### EPILEPSY.

There are no children attending or awaiting admission to a Special School for Epileptic Children.

## EXTRACTS FROM THE ANNUAL REPORT ON THE WORK OF THE CHILD GUIDANCE CLINIC.

The Child Guidance Clinic having completed its ninth year, has become well known in the district, and many organisations take advantage of the service. The Mental Health Act lays upon Local Health Authorities the responsibility for prevention in the field of mental health. We are anxious to be contacted by parents, teachers and others dealing with the young, when children show early signs of disturbance and before they have become real problems.

### *Intelligence Testing.*

It is often difficult for a teacher dealing with a large class to distinguish between inertia, dullness, faulty emotional reaction or inadequate personality, in a backward child. An objective test of intelligence indicating his potentialities and the extent of his disturbance, which may be due to environmental conditions, can help the school to give him the attention he needs. Some children can regress to a state resembling mental sub-normality, due to inadequate emotional attachments.

### *Mentally Handicapped Pupils (I.Q.—70).*

These children attend classes in ordinary schools, but Head Teachers, wherever it can be arranged, put them into a small class, so that they may have extra tuition.

TABLE 1.

#### *Re-Tests.*

I.Q.	(-30)		(30—39)		(40—49)		(50—59)		(60—69)		Total.	
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.
—	—	—	—	—	1	—	2	1	5	2	8	3

#### *Age Range :—*

Years.	(3—7)		(8—11)		(12—14)		(15+)		Total.	
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.
3	2	5	—	—	—	1	—	—	8	3

Total 11

#### *New Cases Tested.*

I.Q.	(-30)		(30—39)		(40—49)		(50—59)		(60—69)		Total.	
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls
1	1	—	—	—	—	1	2	—	5	8	8	10

Total 18

#### *Age Range :—*

Years.	(3—7)		(8—11)		(12—14)		(15+)		Total.	
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls
5	4	3	3	—	3	—	3	—	8	10

Total 18

Complete total of mentally handicapped

29

*Dull and Backward (I.Q. 70-85).*

These children present a difficult problem in large classes. Fortunately, since we have started our Adjustment Classes many of these children are having extra reading and spelling lessons, three times each week.

*Educationally Retarded Children (I.Q. 85 +).*

Reluctant readers, poor spellers and those having difficulty with arithmetic, attend the Clinic. These children have all been real problems, and the reading tuition etc. has been used as one form of therapy.

We have had disturbed children, truants, delinquents, deprived children and timid coddled children, demanding shelter from mother and unable to learn. We try to help all these children to gain confidence and adjust themselves to the community.

*Play Therapy.*

The group has been much larger than it was last year. Two girls showed undesirable conduct, running away from home, etc., a reaction to faulty treatment by their mothers. One little pre-school boy pulled out his hair owing to frustration, due to lack of space to play. Other children showed aggression at school and anti-social conduct outside. All have made progress towards a happier relationship with others. We take the opportunity when mothers bring children to the Play Group, to discuss the handling of their children with them.

*Reading Backwardness.*

The Adjustment Classes are established upon the hypothesis that the majority of children who are retarded in reading are suffering from reading backwardness and that the emotional disorder which they may show stems from this retardation and failure. Sir Cyril Burt demonstrates in his research done for his book, "The Backward Child", that to allow a child to continue to fail badly in what most of his class-mates do well is to take away his confidence and self-respect, and every psychologist can instance case after case where careful teaching, to help the child to succeed, has given him back his desire to achieve and changed his outlook.

It is well-known to all psychologists that the further down the school one goes, the more difficult the teaching. Many seven-year-olds with slower than normal perceptual motivation and low intelligence are unable to read in spite of skilled teaching and hard work on the part of infant teachers. These children are at a great disadvantage when they enter the Junior School and can no more be blamed for lack of progress than can the four months old baby for inability to walk. Most of them at the age of eight or over can be taught to read fairly quickly as they have reached the mental age necessary for learning to read. The Adjustment Class teacher working with a small group can motivate a child to learn when the class teacher with a class of forty-eight children has no time to devote to the backward reader. It is known that even in ideal teaching conditions there would still be a sufficient number of children failing to make normal progress in the fundamentals to justify arrangements for individual adjustment teaching.

As Stockton is compact, it was decided that teachers should go to the schools because this would be safer for the children and less time consuming. Three schools had a spare class-room and five schools a small room available to accommodate a teacher and six pupils. In other schools, with the co-operation of the School Medical Officer, it was arranged that the medical room be available at certain times.

The Teachers are fully qualified certificated teachers, preferably with Infant and Junior experience. Those unfamiliar with the technique of teaching reading came to the Child Guidance Clinic to be trained.

The teachers are permitted to undertake a maximum of three days (12 hours) teaching per week. Two teachers, experienced in this work, started on 3.3.60 and the last two of the twelve teachers employed in this work commenced just before Christmas. Only two teachers were willing to do three full days' teaching. For most Primary Schools, three mornings per week seems to be sufficient.

Twenty Primary Schools are now served by Adjustment Classes. Five schools are not served. Three intimated that they had a backward class which catered sufficiently for the pupils. The other two schools had few backward readers. One school with only three backward readers sent them to the Clinic once a week. Additional help was given at home, and they have all improved.

## PARTICULARS OF ADJUSTMENT CLASSES.

No. of children.			No. of Weekly Sessions.	Length of Session.	No. of children in each class.	No. of schools represented.
Boys.	Girls.	Total.				
134	69	203	3	1 hour	6 - 8	20

Children are admitted to these classes between the ages of eight and eleven. They had to be over two years retarded below the average attainment appropriate to their age, provided that they had not previously been ascertained as educationally subnormal. This choice was based on the fact that the aim of Adjustment Class teaching is to complete the primary education of children who are at present entering Secondary Schools.

In these days of shortage of staff, over-large classes etc., the child who finds difficulty in reading can fall by the wayside, and gradually take a dislike to learning of any kind.

The children were tested by Burt's Standardised Word Reading Test, by the Psychologist, and the adjustment classes were made up in consultation with the Head Teachers.

## Amount of Retardation on Entry.

Lowest.	Highest.	Average.
1 yr. 10 mths.	6 yrs. 1 mth.	3 yrs. 7 mths.

## Reading Standards on Entry.

Lowest Reading Age.	Highest Reading Age.
Nil.	7 yrs. 9 mths.

Each remedial session consists of a period of one hour, and children are in groups of six to eight. They have three sessions each week. Books, apparatus, pencils and writing copies are supplied by the Child Guidance Clinic. The Educational Psychologist visits each school regularly in order to discuss with the teachers matters connected with the work.

The success of Adjustment Class attendance as a means of overcoming reading backwardness is measured by attainment testing, using Burt's Graded Vocabulary Test of Reading Accuracy.

Improvement in Reading Ability of Children Attending Classes.

Improvement after attendance for	No. of children tested.	Least improvement.	Greatest improvement.	Average improvement.	Discharged.
Two Terms	31	8 mths.	3 5	1 6	14
One Term	51	Nil.	2 4	1 2	—
2 months	48	Nil	1 5	4	—
1 month	5	Nil.	1 3	3	—

Arrangements for a child's continuation at an Adjustment Class and for his discharge are made on the results of subsequent testing. When the Adjustment Class teacher is of the opinion that the child is ready for discharge, that is, when the Reading Age is equivalent to the Chronological Age, consultation takes place with the Head Teacher and Class Teacher. No child, unless special circumstances exist, for example illness, is kept in an Adjustment Class longer than one year.

Progress in One Group of Eight Children.

Date of Birth.	March, 1960	December, 1960	Improvement.
	Reading Age.	Reading Age.	
19.9.50	... 6 yrs. 0 mths.	9 yrs. 5 mths.	3 yrs. 5 mths.
15.2.51	... 5 yrs. 9 mths.	8 yrs. 2 mths.	2 yrs. 5 mths.
7.7.51	... 6 yrs. 0 mths.	7 yrs. 5 mths. (left in Aug.)	1 yr. 5 mths.
9.2.51	... 6 yrs. 7 mths.	7 yrs. 3 mths.	8 mths.
9.9.50	... 6 yrs. 9 mths.	7 yrs. 8 mths. (left in Aug.)	11 mths.
13.9.51	... 6 yrs. 2 mths.	7 yrs. 5 mths.	1 yr. 3 mths.
9.5.51	... 5 yrs. 0 mths.	8 yrs. 4 mths.	3 yrs. 4 mths.
23.5.51	... 6 yrs. 3 mths.	8 yrs. 1 mth.	1 yr. 10 mths.

## SOCIAL WORKER.

Sixty-five new cases and one hundred and thirteen follow-up cases have been visited. Some of these have been visited several times. Cases of truancy have been referred to the Social Worker, who has been able to deal with this problem successfully if the case has been referred to her within a few days after absence from school. It is more difficult to achieve a good result if there has been prolonged absence. Anxiety conditions in young children and adolescent stress have been found to be the main factors in truancy. Housing problems have also been dealt with by the Social Worker. A necessary and important part of a Social Worker's work is to pay attention to external pressures which a family may be meeting.

Help was given to a little girl who developed hysterics at the thought of going to school. The real difficulties that the child was experiencing in relation to school sprang from her unsatisfactory relationship with her mother. The situation was dealt with satisfactorily because of immediate reference to the Social Worker.

Two problem families who have been re-housed are under observation by the Social Worker. The first family was evicted and after considerable investigation the family was re-housed. This family does make an effort now, and immediately seeks the guidance of the Social Worker if any financial problem arises. The mother, however, is still a problem with regard to cleanliness. The second family were given almost immediate assistance to acquire a house. The father had just served a term of imprisonment and it was obvious that immediate assistance would help to prevent him from continuing to bear a grudge against society.

## CASE HISTORIES.

Interviews in Clinic	...	...	...	...	...	...	...	169
Home Visits	...	...	...	...	...	...	...	171
Visits to Schools and other Agencies	...	...	...	...	...	...	...	46
Weekly Therapy Cases	...	...	...	...	...	...	...	9

## CONSULTANT PSYCHIATRIST.

During the past year the work of the Clinic has continued to run smoothly and the case load handled has been in most respects remarkably similar to that handled in the previous year. Coincidentally, the number of new cases referred was exactly the same as in 1959, whilst the total number of cases seen was only marginally larger.

The majority of cases are still being referred by family doctors and by the schools direct, as well as through the Principal School Medical Officer, though a number still come to us from Paediatricians, Probation Officers, Children's Officers and parents themselves. Disorders of emotion and behaviour, and conditions involving faulty bowel and bladder control, continue to constitute the largest groups of problems treated.

We have always been concerned to make some estimate of the therapeutic effectiveness of the Clinic, and though we have had no real doubts on this score, to date it has not been possible to present our results in a satisfactorily precise manner. During the past year, however, it has been our practice to make a careful assessment of the situation when a child is for one reason or another, discharged from Clinic care.

Since the numbers involved are relatively small, categories of improvement have been kept as simple as possible, and cases have been categorised as "satisfactory", "improved" or "not improved." "Satisfactory" is taken to indicate that there has been either a disappearance of symptoms for which the child was first referred, or that the problem necessitating referral has been satisfactorily resolved. "Improved" is taken simply to imply that some progress has been made in a satisfactory direction, but that either symptoms remain or some continuing problem exists. "Not improved" implies that our efforts at guidance and treatment have failed, and that matters remain unchanged, or in some cases a new crisis or development has occurred.

In the main, cases which show improvement are of course kept under Clinic surveillance until a satisfactory outcome is reached, so that a considerable case load which is carried forward to the following year will consist of children who, were they assessed at this juncture, would be regarded as "improved". A proportion of these cases carried forward will of course also ultimately fall into the "not improved" class, since we try not to give up easily, and the majority of cases which are discharged from the Clinic in this category are in fact removed by the operation of some external agency, such as perhaps, to Approved Schools on the instructions of the courts.

During the current year, of our total case load of ninety-three, of which fifty-three were new referrals during the year, forty-five cases have been discharged or lost by default, leaving a balance of forty-eight to be carried forward to the new year; a total slightly larger than that carried

forward a year ago. Of the forty-five discharged, thirty-nine fall into the group classified as "satisfactory", three into the group classified as "improved" and four into the group classified as "not improved". A further nine cases were lost to us as a result of failure to keep follow-up appointments, and no request for a further appointment being received from the family physician concerned, after he had been notified of what had occurred. It can therefore reasonably be hoped that the majority of these cases also have reached a satisfactory outcome, or at least a stage where symptomatic or other pressures no longer compel a seeking for help or guidance.

These figures, we feel, are most encouraging, and justify in a most emphatic way the work of the Clinic.

Number of cases seen by psychiatrist	...	...	...	...	93
Number of new cases referred during the year	...	...	...	...	53
Number of cases attending at regular intervals for psychotherapy				...	61
Total number of consultations (parents and children)	...	...	...	...	431

<i>Sources of Referral.</i>	<i>New Cases.</i>	<i>Brought Fwd.</i>	<i>Total.</i>
Durham County Medical Officer	5	3	8
Principal School Medical Officer	2	5	7
Medical Practitioners	19	13	32
Paediatricians	5	2	7
Probation Officer	3	2	5
Schools	12	13	25
Parents	5	2	7
Children's Officer	2	—	—
	—	—	—
	53	40	93
	—	—	—

<i>Diagnostic Groups.</i>	<i>New Cases.</i>	<i>Brought Fwd.</i>	<i>Total.</i>
Backwardness	6	6	12
Disorders of emotion and behaviour	34	23	57
Faulty bowel and bladder control	11	6	17
Epilepsy	1	3	4
Speech disorder	1	2	3
	—	—	—
	53	40	93
	—	—	—

## APPENDIX

### *Sources of Referral.*

Durham County School Medical Officer	...	...	...	...	7
Principal Borough School Medical Officer	...	...	...	...	15
Consultant Paediatricians	...	...	...	...	6
Medical Practitioners	...	...	...	...	19
Schools	...	...	...	...	133
Parents	...	...	...	...	8
Probation Officers	...	...	...	...	3
Children's Officer	...	...	...	...	1

*Psychological Record.*

(1) Educational Retardation—						
General backwardness	...	...	...	...	...	75
Backwardness in reading	...	...	...	...	...	1
Mentally defective	...	...	...	...	...	31
(2) Personality Maladjustment—						
General instability	...	...	...	...	...	14
Anxiety or obsessional states	...	...	...	...	...	4
Emotional retardation and regression	...	...	...	...	...	5
Night terrors	...	...	...	...	...	1
(3) Habit Disorders—						
Enuresis and soiling	...	...	...	...	...	6
Speech defect	...	...	...	...	...	5
Hearing defect	...	...	...	...	...	1
(4) Anti-Social Tendencies—						
Probation	...	...	...	...	...	1
Unmanageable behaviour	...	...	...	...	...	4
Aggression, temper-tantrums	...	...	...	...	...	1
Truancy and wandering	...	...	...	...	...	2
Theft	...	...	...	...	...	3
Lying	...	...	...	...	...	4
(5) Social Difficulties—						
Strong physical factors	...	...	...	...	...	8
Strong home factors	...	...	...	...	...	21
Hereditary factors	...	...	...	...	...	1
Non-co-operation	...	...	...	...	...	2
Vocational Guidance	...	...	...	...	...	1
(6) Special Interviews—						
I.Q. and advice	...	...	...	...	...	89

*Range of Intelligence.*

Intelligence Quotient.				Boys.	Girls.	Total.
130 +	Very superior intelligence	...	...	1	—	1
116 — 129	Superior intelligence	...	...	10	4	14
86 — 115	Average intelligence	...	...	63	21	84
70 — 85	Dull and backward	...	...	24	36	60
69 and under	Mentally handicapped	...	...	16	13	29
	Unable to be tested	...	...	1	3	4
				Total	115	77
				—	—	—
				—	—	—

*Age Range.*

Years	(3—7)		(8—11)		(12—14)		(15+)		Total	
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls
	68	23	36	35	10	16	1	3	115	77
Total	91		71		26		4		192	

*Reports.*

Durham County School Medical Officer	...	...	...	...	...	...	15
Schools	...	...	...	...	...	...	258
Principal School Medical Officer	...	...	...	...	...	...	55
Consultant Paediatricians	...	...	...	...	...	...	13
Medical Practitioners	...	...	...	...	...	...	81
Probation Officers	...	...	...	...	...	...	8

*Interviews.*

Parents	...	...	...	...	...	...	...	322
Visitors to clinic	...	...	...	...	...	...	...	186

*Visits to*

Schools	...	...	...	...	...	...	...	...	257
Homes	...	...	...	...	...	...	...	...	171

*Examinations*

Intelligence tests (individual)	...	...	...	...	...	...	...	192
---------------------------------	-----	-----	-----	-----	-----	-----	-----	-----

*Treatment.*

Psychological treatment	...	...	...	...	...	...	...	54
Psychotherapeutic treatment	...	...	...	...	...	...	...	61

## COMPLETION OF STATUTORY FORMS.

Statutory forms were completed by the School Medical Officer for some of the children tested by the Educational Psychologist. The findings and/or recommendations were as set out below:—

Incapable of receiving education at school	...	...	...	...	...	...	6
"      "      "      "      "      "      (inexpedient)	...	...	...	...	...	...	—
Requiring special school for educationally subnormal pupils	...	...	...	...	...	...	14
Educationally subnormal—requiring supervision after leaving school	...	...	...	...	...	...	1
Decision deferred—re-testing recommended	...	...	...	...	...	...	2
To remain at ordinary school	...	...	...	...	...	...	3

At the end of the year there were 87 children awaiting admission to special schools for educationally subnormal children, 77 of these having been recommended for day school and 10 for residential school.

## ANNUAL REPORT OF THE SPEECH THERAPIST.

			Defective Stammer.	Articulation.	Hard of Hearing.
Total number on register 1.1.60	...	...	105	274	6
Admissions	...	...	27	65	—
			—	—	—
Discharges	...	...	132	339	6
		...	38	113	1
			—	—	—
Number on register 31.12.60	...	...	94	226	5
			—	—	—
% attendance during the year has been	...		86.15	86.75	96.87

*Discharges.*

An analysis of the numbers shows that of the 37 cases of stammering children who have been discharged, 23 have attained normal speech; one has made such good progress that after consultation with his parents and head teacher further treatment was considered unnecessary. The remaining 14 stammerers were discharged as follows:—one left the area, five out of area cases were transferred to a speech clinic nearer home, one child was withdrawn, 7 left school. Of these last 7 cases, one is now stammering so little that further treatment is thought unnecessary, four have been referred for after school treatment, one has left the area and another is of such poor intelligence as to be considered incapable of benefiting from speech therapy.

Of the 114 cases of defective articulation discharged, 89 have attained normal speech. The remaining 25 have been discharged as follows:—4 were transferred to the groups for stammering children, 10 left the area, 4 were transferred to a clinic nearer home (3 of these were cleft palate cases), 2 were discharged having attained the maximum possible benefit from speech therapy in view of physical and intellectual limitations (their speech is now intelligible although poor), 3 proved to be unsuitable for treatment by speech therapy, one was discharged for non-attendance and one child was withdrawn.

**Lipreading.** Only one case has been discharged during 1960 and this child is improving sufficiently well to enable her to make normal school progress.

*Admissions.*

Of the 92 children admitted during the year, 27 have been classified as stammerers, 4 are cases of cleft palate, and 61 are suffering from various defects of articulation.

The following is a list of numbers of children from various schools, whose treatment has had to be deferred owing to shortage of staff.

St. Cuthbert's R.C.	...	...	...	11
Bailey Street	...	...	...	5
Fred Nattrass Inf.	...	...	...	10
St. Mary's R.C.	...	...	...	19
Norton High Street	...	...	...	11
Portrack	...	...	...	13
				—
				69
				—

### *Interviews.*

150 interviews with parents have been held during the course of the year.

### *Sources of Referral.*

Sources of referral of children admitted have been as follows:— Schools 68, School Medical Service 22, Children's Hospital 1, County Medical Officer 1.

## DENTAL INSPECTION AND TREATMENT.

A part-time Dental Officer has been appointed to assist in the work of this Department, but as the appointment was not made until mid-December it made little difference to the amount of work able to be done in 1960.

The Table below gives details of dental inspection and treatment during 1960.

Number of pupils inspected—	(a) At Periodic Inspections	...	...	10,620
	(b) As Specials	...	...	296
			Total	...
		...	...	10,916
Number found to require treatment	...	...	...	5,386
Number offered treatment	...	...	...	5,386
Number actually treated	...	...	...	2,099
Attendances made by pupils for treatment	...	...	...	2,389
Half days devoted to—	(a) Periodic School Inspection	...	...	83
	(b) Treatment	...	...	298
		Total	...	381

Fillings—Permanent Teeth ...	...	...	...	...	...	...	1,136
Temporary Teeth	...	...	...	...	...	...	24
						Total	...
						...	1,160
Number of teeth filled—Permanent Teeth	...	...	...	...	...	...	1,097
Temporary Teeth	...	...	...	...	...	...	24
						Total	...
						...	1,121
Extractions—Permanent teeth	...	...	...	...	...	...	806
Temporary teeth	...	...	...	...	...	...	2,165
						Total	...
						...	2,971
Administration of general anaesthetics for extraction	...	...	...	...	...	...	634
Orthodontics :—							
Cases commenced during the year	...	...	...	...	...	...	8
Cases brought forward from previous year	...	...	...	...	...	...	1
Cases completed during the year	...	...	...	...	...	...	3
Cases discontinued during the year	...	...	...	...	...	...	2
Pupils treated with appliances	...	...	...	...	...	...	5
Removable appliances fitted	...	...	...	...	...	...	4
Fixed appliances fitted	...	...	...	...	...	...	31
Total attendances	...	...	...	...	...	...	26
Number of pupils supplied with artificial teeth	...	...	...	...	...	...	23
Other operations—Permanent Teeth	...	...	...	...	...	...	414
Temporary Teeth	...	...	...	...	...	...	15
						Total	...
						...	429

### CLEANLINESS INSPECTIONS.

The school nurses continued to make extra inspections in schools known to have a high incidence of uncleanliness, and this policy does appear to be proving worthwhile, as there was a further decrease in the total number of individual children found unclean, the number being 1,064, as against 1,295 in 1959. 467 of these cases were considered serious enough to be asked to report at the clinic, a decrease of 30, compared with the total in 1959.

### RAGWORTH OPEN AIR SCHOOL.

Notification was received from the Minister of Education in the early part of the year that Ragworth Open Air School had now been recognised as providing for both delicate and physically handicapped pupils, and advising that the recognised accommodation be adjusted from 140 to 120.

Most of those admitted to the school are of delicate physique or suffering from such diseases as anaemia, bronchitis, asthma, rheumatism, heart disease or non-infective tuberculosis, or are convalescent after illness or operation.

During 1960, 41 delicate children and 8 physically handicapped children were admitted to the school.

One of the School Medical Officers visits the school regularly and examines every child periodically. Those discharged from the school are also kept under observation, and if necessary re-admitted. Six children were re-admitted during the year.

### IMMUNISATION AGAINST DIPHTHERIA.

The immunisation of, and giving of re-inforcing doses to school children continued in 1960.

228 children attending Infant Departments and 157 children attending Junior Departments, who had not previously been immunised, were immunised.

Booster doses were given to 539 children attending Infant Departments and to 593 children attending Junior Departments.

The figures show increases in all sections, as compared with those for 1959, 385 children newly immunised (328 in 1959), 1,132 given booster doses (807 in 1959).

H. J. PETERS,

Borough School Medical Officer.

### GENERAL.

It will be appreciated that this report owes much to Dr. Shanley, who retired from the County Service in September.

I therefore record his thanks, as well as my own, to the Director of Education and his staff, to the County Medical Officer, and to the Superintendent Health Visitor and her staff, for help and co-operation readily given throughout the year. The support and encouragement of the Chairman and members of the County Education Committee has again been a heartening feature of the year's work, and they may be assured that the School Health Service continues to play a real part in the health and welfare of the children of this County.

JOSEPH T. W. REID,  
Deputy Principal School Medical Officer.

## APPENDIX I.

## MINISTRY OF EDUCATION TABLES RELATING TO THE INSPECTION AND TREATMENT OF PUPILS IN THE ADMINISTRATIVE COUNTY AREA EXCLUDING THE EXCEPTED DIVISION OF STOCKTON-ON-TEES.

Number of Pupils on registers of maintained and assisted nursery, primary, secondary and special schools in January, 1961 ... 148,737

## PART I.

## MEDICAL INSPECTIONS OF PUPILS ATTENDING MAINTAINED AND ASSISTED PRIMARY AND SECONDARY SCHOOLS (INCLUDING NURSERY AND SPECIAL SCHOOLS).

Table A.—*Periodic Medical Inspections.*

Age Groups Inspected (By year of birth)	Number of Pupils Inspected.	Physical Condition of Pupils Inspected.				
		Satisfactory		Unsatisfactory		
		No.	% of Col. (2)	No.	% of Col.(2)	
(1)	(2)	(3)	(4)	(5)	(6)	
1956 and later	...	830	793	95.5	37	4.5
1955	...	3,460	3,396	98.7	64	1.3
1954	...	5,814	5,681	97.7	133	2.3
1953	...	2,254	2,200	97.6	54	2.4
1952	...	727	704	96.8	23	3.2
1951	...	596	564	94.6	32	5.4
1950	...	2,299	2,236	97.3	63	2.7
1949	...	6,654	6,485	97.5	169	2.5
1948	...	3,654	3,581	98.0	73	2.0
1947	...	1,013	992	97.9	21	2.1
1946	...	4,610	4,546	98.6	64	1.4
1945 and earlier	...	6,193	6,065	97.8	128	2.2
Total	...	38,104	37,243	97.7	861	2.3

Table B.—Pupils found to require treatment at Periodic Medical Inspections.

(excluding Dental Diseases and Infestation with Vermin).

Age Groups Inspected (By year of birth) (1)	For defective vision (excluding squint). (2)	For any of the other conditions recorded in Part II. (3)	Total Individual pupils. (4)
1956 and later	4	90	91
1955	223	519	681
1954	499	992	1,317
1953	224	355	525
1952	69	99	154
1951	83	83	148
1950	300	259	515
1949	761	784	1,501
1948	455	404	776
1947	79	91	162
1946	620	513	1,017
1945 and earlier	765	505	1,176
Total	4,082	4,694	8,063

Table C.—Other Inspections.

Notes :—A special inspection is one that is carried out at the special request of a parent, doctor, nurse, teacher or other person.

A re-inspection is an inspection arising out of one of the periodic medical inspections or out of a special inspection.

Number of Special Inspections	...	...	...	1,913
Number of Re-inspections	...	...	...	10,705
Total	...	...	...	12,618

Table D.—Infestation with Vermin.

Notes :—All cases of infestation, however slight, are included.

(a) Total number of individual examinations of pupils in schools by school nurses or other authorised persons	...	...	...	82,997
(b) Total number of individual pupils found to be infested	...	...	...	4,939
(c) Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2) Education Act, 1944)	...	...	...	—
(d) Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3) Education Act, 1944)	...	...	...	—

## PART II.

## DEFECTS FOUND BY MEDICAL INSPECTION DURING THE YEAR.

Table A.—*Periodic Inspections.*

Note : (T) Number of pupils found to need treatment.  
 (O) Number of pupils found to need observation.

Defect or Disease	Periodic Inspections							
	Entrants		Leavers		Others		Total	
	(T) (1)	(O) (2)	(T) (3)	(O) (4)	(T) (5)	(O) (6)	(T) (7)	(O) (8)
Skin ... ...	202	187	204	180	199	149	605	516
Eyes—								
(a) Vision ...	1,002	740	1,341	666	1,739	889	4,082	2,295
(b) Squint ...	415	119	113	83	234	187	762	389
(c) Other ... ...	66	49	64	55	115	60	245	164
Ears—								
(a) Hearing ...	149	307	94	133	123	217	366	657
(b) Otitis Media ...	62	166	44	89	63	137	169	392
(c) Other ... ...	21	28	17	31	26	28	64	87
Nose and Throat ...	512	1,124	85	292	271	763	868	2,179
Speech ... ...	192	270	10	35	64	107	266	412
Lymphatic Glands ...	15	190	6	19	6	110	27	319
Heart ... ...	29	171	61	103	66	168	156	442
Lungs ... ...	200	403	42	136	107	327	349	866
Developmental—								
(a) Hernia ...	23	47	3	9	14	30	40	86
(b) Other ...	21	156	13	45	49	123	83	324
Orthopaedic—								
(a) Posture ...	3	22	6	98	16	99	25	219
(b) Feet ...	62	177	36	263	74	291	172	731
(c) Other ... ...	78	131	83	149	89	202	250	482
Nervous System—								
(a) Epilepsy ...	27	12	19	10	35	9	81	31
(b) Other ...	17	45	22	42	38	75	77	162
Psychological—								
(a) Development ...	30	93	43	63	96	204	169	360
(b) Stability ...	18	56	4	20	17	54	39	130
Abdomen ... ...	26	32	13	12	49	24	88	68
Other ... ...	115	77	107	47	230	55	452	179
Totals ...	3,285	4,602	2,430	2,580	3,720	4,308	9,435	11,491

Table B.—*Special Inspections.*

						SPECIAL INSPECTIONS.	
Defect or Disease. (1)					Pupils requiring Treatment (2)	Pupils requiring Observation. (3)	
Skin	...	...	...	...	64	81	
Eyes —	(a) Vision	...	...	...	787	503	
	(b) Squint	...	...	...	154	51	
	(c) Other	...	...	...	24	21	
Ears —	(a) Hearing	...	...	...	97	58	
	(b) Otitis Media	...	...	...	31	67	
	(c) Other	...	...	...	13	7	
Nose and Throat	...	...	...	...	115	333	
Speech	...	...	...	...	76	78	
Lymphatic Glands	...	...	...	...	1	43	
Heart	...	...	...	...	32	83	
Lungs	...	...	...	...	88	284	
Developmental—							
	(a) Hernia	...	...	...	4	15	
	(b) Other	...	...	...	23	42	
Orthopaedic—							
	(a) Posture	...	...	...	3	34	
	(b) Feet	...	...	...	21	87	
	(c) Other	...	...	...	42	81	
Nervous System—							
	(a) Epilepsy	...	...	...	24	23	
	(b) Other	...	...	...	23	22	
Psychological—							
	(a) Development	...	...	...	138	84	
	(b) Stability	...	...	...	21	42	
Abdomen	...	...	...	...	24	29	
Other	...	...	...	...	76	74	
Totals					1,881	2,142	

### PART III.

#### TREATMENT OF PUPILS ATTENDING MAINTAINED AND ASSISTED PRIMARY AND SECONDARY SCHOOLS (INCLUDING NURSERY AND SPECIAL SCHOOLS).

NOTES :—This part of the return gives the total numbers of :—

- (i) cases treated or under treatment during the year by members of the Authority's own staff ;
- (ii) cases treated or under treatment during the year in the Authority's school clinics under National Health Service arrangements with the Regional Hospital Board ; and
- (iii) cases known to the Authority to have been treated or under treatment elsewhere during the year.

*Table A.—Eye Diseases, Defective Vision and Squint.*

		Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint	...	841
Errors of refraction (including squint)	...	11,339
Total	...	12,180
Number of pupils for whom spectacles were prescribed	...	10,887

*Table B.—Diseases and Defects of Ear, Nose and Throat.*

		Number of cases known to have been dealt with
Received operative treatment :—		
(a) for diseases of the ear	...	13
(b) for adenoids and chronic tonsillitis	...	1,312
(c) for other nose and throat conditions	...	17
Received other forms of treatment	...	951
Total		2,293
Total number of pupils in schools who are known to have been provided with hearing aids :—		
*(a) in 1960	...	26
(b) in previous years	...	68

\*A pupil recorded under (a) above is not recorded at (b) in respect of the supply of a hearing aid in a previous year.

Table C.—Orthopaedic and Postural Defects.

		Number of cases known to have been treated
(a) Pupils treated at clinics or out-patients departments	...	350
(b) Pupils treated at school for postural defects		—
Total	...	350

Table D.—Diseases of the Skin.

(excluding uncleanliness, for which see Table D of Part I).

		Number of cases known to have been treated
Ringworm—(a) Scalp	...	3
(b) Body	...	21
Scabies	...	22
Impetigo	...	315
Other skin diseases	...	1,468
Total	...	1,829

Table E.—Child Guidance Treatment.

		Number of cases known to have been treated
Pupils treated at Child Guidance Clinics	...	93

Table F.—Speech Therapy.

		Number of cases known to have been treated
Pupils treated by speech therapists	...	624

Table G—Other Treatment given.

		Number of cases known to have been treated.
(a) Pupils with minor ailments	...	7,882
(b) Pupils who received convalescent treatment under School Health Service arrangements	...	6
(c) Pupils who received B.C.G. vaccination	...	9,557
(d) Other than (a) (b) and (c) above.		
Orthoptic	...	116
U.V.R.	...	338
Total	...	17,899

## PART IV.

## DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY.

## (1) Number of pupils inspected by the Authority's Dental Officers :—

(a) At Periodic Inspections	...	...	...	...	...	49,959
(b) As Specials	...	...	...	...	...	739
					Total (1)	50,698

(2) Number found to require treatment	...	...	...	...	...	33,197
(3) Number offered treatment	...	...	...	...	...	31,821
(4) Number actually treated	...	...	...	...	...	26,320
(5) Number of attendances made by pupils for treatment, including those recorded at heading 11(h) below	...	...	...	...	...	34,833

## (6) Half-days devoted to :—

(a) Periodic (School) Inspection	...	...	...	...	...	468
(b) Treatment	...	...	...	...	...	6,121
					Total (6)	6,589

## (7) Fillings :—

(a) Permanent Teeth	...	...	...	...	...	18,601
(b) Temporary Teeth	...	...	...	...	...	1,793
					Total (7)	20,394

## (8) Number of teeth filled :—

(a) Permanent Teeth	...	...	...	...	...	16,423
(b) Temporary Teeth	...	...	...	...	...	1,766
					Total (8)	18,189

## (9) Extractions :—

(a) Permanent Teeth	...	...	...	...	...	5,288
(b) Temporary Teeth	...	...	...	...	...	13,882
					Total (9)	19,170

## (10) Administration of general anaesthetics for extractions      ...      ...      4,494

## (11) Orthodontics :—

(a) Cases commenced during the year	...	...	...	...	372
(b) Cases brought forward from previous year	...	...	...	...	321
(c) Cases completed during the year	...	...	...	...	114
(d) Cases discontinued during the year	...	...	...	...	28
(e) Pupils treated with appliances	...	...	...	...	300
(f) Removable appliances fitted	...	...	...	...	298
(g) Fixed appliances fitted	...	...	...	...	2
(h) Total attendances	...	...	...	...	2,454

(12) Number of pupils supplied with artificial teeth	...	...	...	104
				=====

## (13) Other Operations

(a) Permanent Teeth	...	...	...	...	...	3,186
(b) Temporary Teeth	...	...	...	...	...	410
					Total (13)	...

3,596

=====

## APPENDIX II.

REPORT OF THE COUNTY SUPERINTENDENT HEALTH VISITOR  
FOR THE YEAR ENDED 31ST DECEMBER, 1960.

1. Number of health visitors on the staff during 1960 who devoted a part of their time to school work—103.
2. No district nurses were employed in school work.
3. 14,073 visits were paid to homes and 1,222 to schools.
4. During the Cleanliness Surveys carried out in the County Administrative area by health visitors and school nurses, 61,776 girls were examined in 612 departments of 471 schools, and it was found that 4,939 were unclean, i.e. showed evidence of nits or vermin (219 verminous,. The following table compares these figures with the figures of the previous four years:—

	Percentage Clean.	Percentage Unclean	Percentage Verminous of the unclean
1956   ...   ...   ...	90.9	9.1	4.1
1957   ...   ...   ...	91.2	8.8	4.0
1958   ...   ...   ...	91.5	8.5	3.7
1959   ...   ...   ...	91.6	8.4	4.6
1960   ...   ...   ...	92.0	8.0	4.4

5. The percentage of clean scholars shows a slight improvement this year.
6. In 73 schools, all the children were found to be clean.
7. The health visitors and school nurses made 12,464 visits to the homes of the children who were found to be unclean. The school nurses are responsible for the visits in Felling, Hartlepool and Jarrow, with the exception of the completion of Forms 2 H.P., which is done by the health visitors.
8. The following table shows the number of subsequent examinations of the unclean children:—

Inspection.				No. of children inspected.	No. of children still unclean.
1st	Re-inspection (unclean children)	...	...	4,840	3,990
2nd	"	"	"	4,679	3,372
3rd	"	"	"	3,983	2,721
4th	"	"	"	3,278	2,209
5th	"	"	"	2,617	1,753
6th	"	"	"	1,882	1,246

ANALYSIS OF CASES UNDER HOME SUPERVISION  
OF HEALTH VISITORS DURING THE YEAR 1960.

Conditions.					Total No. of Conditions under supervision.	Total No. of visits re conditions.	Total Con- ditions satisfactorily improved.
1. Cleanliness	...	...	...	...	161	730	104
2. Infestation	Head	...	...	...	316	1,267	170
	Body	...	...	...	—	—	—
3. Teeth	...	...	...	...	3	9	—
4. Skin	...	...	...	...	262	422	220
5. Eyes	a. Vision	...	...	...	15	33	—
	b. Squint	...	...	...	3	5	—
	c. Other	...	...	...	14	22	12
6. Ears	a. Hearing	...	...	...	5	16	—
	b. Otitis Media	{ R	...	...	3	11	—
		{ L	...	...	—	—	—
	c. Other	...	...	...	7	14	5
7. Nose or Throat	...	...	...	...	45	45	40
8. Speech	...	...	...	...	4	9	—
9. Cervical glands	...	...	...	...	—	—	—
10. Heart and circulation	...	...	...	...	1	4	—
11. Lungs	...	...	...	...	2	6	—
12. Development :—							
	a. Hernia	...	...	...	3	3	1
	b. Other	...	...	...	9	14	1
13. Orthopaedic :—							
	a. Posture	...	...	...	—	—	—
	b. Flat foot	...	...	...	3	10	—
	c. Other	...	...	...	—	—	—
14. Nervous system :—							
	a. Epilepsy	...	...	...	—	—	—
	b. Other	...	...	...	3	5	—
15. Psychological :—							
	a. Development	...	...	...	2	6	—
	b. Stability	...	...	...	—	2	—
16. Clothing	...	...	...	...	100	338	81
17. Debility	...	...	...	...	7	16	4
18. Other Tuberculosis Cases	...	...	...	...	4	8	—
19. Rheumatism	...	...	...	...	1	6	—
Totals					973	3,001	638

In addition, the Health Visitors spent :—

118 days at School Clinics.

538 days conducting medical inspections.

144 days escorting children to special schools.

49 days at Nursery Schools.

APPENDIX III.  
PERMANENT SCHOOL CLINICS

School Clinic.		Services available 31st December, 1960.					Building Used by M. & C.W. & S.H.S.	
Medical Officer Attends	Minor Ailments	U.V.R. Lamp in use	Dental Officer Attends	School Oculist Attends	Speech Therapist Attends	Educa- tional Psych- ologist Attends		
Billingham, Queensway	... Tuesday Friday	Daily	—	Daily	—	Yes	Yes	Yes
Birtley, Hexham Villa	... Monday Wednesday	Daily	—	Daily (except Tues. p.m.)	—	Yes	Yes	do.
Bishop Auckland, Ninefields, Etherley Lane	... Monday Thursday	Daily	—	Daily	Yes	Yes	Yes	do.
Blaydon, Shildon Road	... Tuesday Friday	Daily	Mon. (p.m.) Thurs. (a.m.)	Daily	Yes	Yes	Yes	do.
Consett, 192 Medomsley Road	... Tuesday Friday	Daily	—	Daily	Yes	—	Yes	do.
Crook, Dawson Street	... Wednesday	Daily	Thurs. (p.m.)	Daily	Yes	Yes	Yes	S.H.S.
Durham, Musgrave Gardens	... Monday Thursday	Daily	Wed. (p.m.)	Daily	Yes	Yes	—	S.H.S. & M. & C.W.
Felling, Heworth	... Mon. Thurs.	... Mon. Thurs.	Tues. (p.m.) Fri. (p.m.)	Daily	Yes	—	Yes	S.H.S.
Hartlepool, Frederick Street	... Mon. (a.m.) Wed. (a.m.)	Mon. { Wed. Fri. } a.m.	—	—	—	—	—	M. & C.W. & S.H.S.



## TEMPORARY SCHOOL CLINICS.

		Services available 31st December, 1960.					Building Used by
School Clinic	Medical Officer Attends	Minor Ailments	U.V.R. Lamp in use	Dental Officer Attends	School Oculist Attends	Speech Therapist Attends	
Barnard Castle. Methodist Schoolroom	... ...	Alternate Wed. (a.m.)	—	—	—	—	M. & C.W. & S.H.S.
Butterknowle County Mixed School	—	Tues. (a.m.)	—	—	—	—	S.H.S.
Evenwood C.E. Mixed School	...	Tues. (p.m.)	—	—	—	—	do.
Witton Park County Mixed School	—	Tues (a.m.) Fri. (a.m.)	—	—	—	—	do

## MOBILE DENTAL VANS

Two mobile dental vans serve the Teesdale and Weardale rural areas daily.

## CHILD GUIDANCE CENTRES.

## APPENDIX IV.

ANALYSIS OF CASES EXAMINED AT THE SCHOOL CLINICS  
DURING THE YEAR 1960.

Defect or Disease.							No. of Cases.	No. of Examinations.
1	Cleanliness	...	...	...	...	...	7	13
2	Infestation	Head	...	...	...	...	260	832
		Body	...	...	...	...	1	12
3	Teeth	...	...	...	...	...	62	75
4	Skin —	a. Ringworm of Scalp	...	...	...	...	19	65
		b. Ringworm of Body	...	...	...	...	22	43
		c. Other	...	...	...	...	1,600	3,240
5	Eyes —	a. Vision	...	...	...	...	376	455
		b. Squint	...	...	...	...	47	62
		c. Other	...	...	...	...	490	778
6	Ears —	a. Hearing	...	...	...	...	997	1,360
		b. Otitis Media	...	...	...	...	94	202
			R	...	...	...	77	228
		c. Other	...	...	...	...	317	630
7	Nose or Throat	...	...	...	...	...	646	1,326
8	Speech	...	...	...	...	...	123	162
9	Lymphatic Glands	...	...	...	...	...	62	109
10	Heart and Circulation	...	...	...	...	...	220	474
11	Lungs	...	...	...	...	...	740	2,107
12	Development —	a. Hernia	...	...	...	...	3	9
		b. Other	...	...	...	...	32	87
13	Orthopaedic —	a. Posture	...	...	...	...	5	13
		b. Feet	...	...	...	...	64	108
		c. Other	...	...	...	...	281	461
14	Nervous System —	a. Epilepsy	...	...	...	...	19	55
		b. Other	...	...	...	...	463	1,035
15	Psychological —	a. Development	...	...	...	...	61	104
		b. Stability	...	...	...	...	119	192
16	General Debility	...	...	...	...	...	815	2,251
17	Abdomen	...	...	...	...	...	165	280
18	Other Defects	...	...	...	...	...	1,795	3,790
19	Special Cases	...	...	...	...	...	1,109	1,142
20	No appreciable Defect or Disease	...	...	...	...	...	432	520
Totals							11,523	22,220

NUMBER OF CASES TREATED AT THE SCHOOL CLINICS  
DURING THE YEAR 1960.

Defect or Disease							No. of Cases.	No. of Attendances.
Ringworm—Scalp	...	...	...	...	...	...	3	10
Ringworm—Body	...	...	...	...	...	...	21	96
Scabies	...	...	...	...	...	...	22	84
Impetigo	...	...	...	...	...	...	315	1,090
Other skin diseases	...	...	...	...	...	...	1,468	4,377
Minor Eye Defects (external and other but excluding errors of refraction and squint)	...	...	...	...	...	...	755	2,170
Refractions	...	...	...	...	...	...	11,339	11,339
Minor Ear Defects	...	...	...	...	...	...	497	2,024
Miscellaneous (e.g. minor injuries, bruises, sores, chilblains etc.)	...	...	...	...	...	...	6,303	21,624
Nose and Throat Conditions	...	...	...	...	...	...	327	627
Ultra Violet Ray	...	...	...	...	...	...	338	4,854
Totals							21,388	48,295

B.C.G. VACCINATION, 1960.

Area.	Sanitary District	Month(s) Schemes Held.	Number Skin Tested	Positive Reactors	Negative Reactors given B.C.G.	Number absent at time of reading.	Negative reactors not vaccinated for medical reasons.	
							... November... Sept. Dec.	... Mar./Apr. Nov./Dec. Sept./Oct. Jan. Nov./Dec.
2	Jarrow M.B. Hebburn U.D.	... ...	... 615 520	77 72	506 418	32 30	— —	— —
3	Consett U.D. Stanley U.D. Lanchester R.D.	... ... ...	... 1,673 694 322	295 88 83	1,285 568 222	74 38 16	19 — 1	— — —
4	Chester-le-Street U.D. Chester-le-Street R.D.	... ...	... 205 666	69 212	128 424	7 27	1 3	— —
5	Hetton-le-Hole U.D. Houghton-le-Spring U.D. Sunderland R.D.	... ... ...	... 174 466 717	20 52 152	139 375 519	15 39 46	— — —	— — —
7	Durham M.B. Brandon U.D. Durham R.D.	... ... ...	... 341 521 710	56 58 189	270 420 471	15 42 41	— 1 9	— — —
8	Seaham U.D. Easington R.D.	... ...	... 767 875	111 140	611 682	45 52	— —	— —
9	Barnard Castle U.D. Barnard Castle R.D.	... ...	... 195 112	34 23	151 85	10 4	— —	— —
10	Bishop Auckland U.D. Shildon U.D. Spennymoor U.D.	... ... ...	... 758 155 689	252 33 314	459 109 337	44 13 28	3 — 10	3 9 6
11	Hartlepool M.B. Billingham U.D. Darlington R.D. Sedgefield R.D. Stockton R.D.	... ... ... ... ...	... 660 499 189 574 66	144 118 47 130 12	454 345 131 395 53	29 27 5 41 —	33 9 6 8 1	33 9 6 8 1
	Totals	...	13,163	2,781	9,557	720	105	





